| Fill in this information to identify your case: | | |
|---|---|--------------------------------------|
| United States Bankruptcy Court for the : | | |
| NORTHERN District ofILLINOIS(State) | | |
| Case Number (If known): | Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13 | ☐ Check if this is an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together-called a joint case-and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1: | Identify Yourself | | |
|------------------|---|----------------------------|---|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. Your | full name | | |
| gover identit | the name that is on your nment-issued picture fication (for example, driver's license or | Crystal First name Lashone | First name |
| passp | | Middle name | Middle name |
| identif | your picture fication to your meeting he trustee. | Brown Last name | Last name |
| | | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| 2. All of | ther names you | | |
| have years | used in the last 8 | First name | First name |
| | le your married or en names. | Middle name | Middle name |
| | | Last name | Last name |
| | | First name | First name |
| | | Middle name | Middle name |
| | | Last name | Last name |
| your | the last 4 digits of Social Security | xxx - xx - <u>0202</u> | XXX - XX |
| Indivi | er or federal dual Taxpayer fication number | OR | OR |
| identi | incauon number | 9 xx - xx | 9xx - xx |

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Document Brown Crystal Lashone Debtor 1 Case Number (if known)

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|----|---|--|--|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | Business name Business name EIN EIN | I have not used any business names or EINs. Business name Business name EIN EIN |
| 5. | Where you live | 6245 W Wabansia Ave Number Street | If Debtor 2 lives at a different address: Number Street |
| | | Chicago IL 60639 City State ZIP Code COOK County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number Street P.O. Box City State ZIP Code | City State ZIP Code County If Debtor 2's mailing address is different from the one above, fill it in here. Note that the court will send any notices this mailing address. Number Street P.O. Box City State ZIP Code |
| 6. | Why you are choosing this district to file for bankruptcy. | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408 | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408 |

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Crystal Lashone

Debtor 1

Document

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Case Number (if known)

| Pa | Tell the Court About You | ur Bankruptcy | Case | | | | |
|-----|---|------------------------|--|--|---|---|--|
| 7. | The chapter of the Bankruptcy Code you | | • | ption of each, see <i>Notice</i> 010)). Also, go to the top o | | J.S.C. § 342(b) for Individuals ck the appropriate box. | |
| | are choosing to file under | ☐ Chapter 7 | | | | | |
| | under | ☐ Chap | oter 11 | | | | |
| | | ☐ Chap | oter 12 | | | | |
| | | ■ Chap | oter 13 | | | | |
| 8. | How you will pay the fee | local yours subn | court for more des | tails about how you ma with cash, cashier's ch nt on your behalf, your | y pay. Typically eck, or money o | x with the clerk's office in your y, if you are paying the fee order. If your attorney is pay with a credit card or check | |
| | | ☐ I nee | ed to pay the fee in | n installments. If you c | hoose this optic | on, sign and attach the | |
| | | Appl | ication for Individu | als to Pay The Filing F | ee in Installmer | nts (Official Form 103A). | |
| | | By la less pay t | iw, a judge may, b than 150% of the c the fee in installme | ut is not required to, was official poverty line that | aive your fee, a applies to your option, you mu | n only if you are filing for Chapter 7. Ind may do so only if your income is a family size and you are unable to just fill out the Application to Have the with your petition. | |
| 9. | Have you filed for | ■ No | | | | | |
| 9. | bankruptcy within the | _ | | | | | |
| | last 8 years? | ☐ Yes. | District None | When | | Case Number | |
| | | | | | MM / DD / Y | YYY | |
| | | | District None | When | | Case Number | |
| | | | | | MM / DD / Y | YYY | |
| | | | District | When | | Case Number | |
| | | | | | MM / DD / Y | YYY | |
| 10. | Are any bankruptcy cases pending or being | ■ No | | | | | |
| | filed by a spouse who is | ☐ Yes. | | | | Relationship to you | |
| | not filing this case with you, or by a business | | District | When | MM / DD / Y | Case Number, if known | |
| | parter, or by affiliate? | | | | WINN BB7 1 | | |
| | | | | | | Relationship to you | |
| | | | District | When | | Case Number, if known | |
| | | | | | MM / DD / Y | YYY | |
| 11. | Do you rent your residence? | □ No. ■ Yes. | Go to line 12 Has your landlord residence? | obtained an eviction judgr | nent against you | and do you want to stay in your | |
| | | | ■ No. Go to line □ Yes. Fill out a | Initial Statement About an | Eviction Judgme | ent Against You (Form 101A) and file it with | |

Debtor 1 Crystal Lashone Document Brown Page 4 of 64

Case Number (if known)

| | Are you a sole proprietor of any full- or part-time | ■ No. | Go to Part 4. Name and location of | husiness | | | | |
|-----|--|----------------|--|-------------------|----------------------|-------------|-------|----------|
| | business? | <u>□</u> 163. | Name and location of | business | | | | |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as | | Name of business, if any | | | | | |
| | a corporation, partnerhsip, or LLC. If you have more than one sole proprietorship, use a | | Number Street | | | | | |
| | separate sheed and attach it to this petition. | | | | | | | |
| | | | City | | | | State | Zip Code |
| | | | Check the appropriate | box to describ | e your business: | | | |
| | | | ☐ Health Care Bus | siness (as define | ed in 11 U.S.C. § 10 | 01(27A)) | | |
| | | | ☐ Single Asset Rea | | · | § 101(51B)) | | |
| | | | ☐ Stockbroker (as | | | | | |
| | | | ☐ Commodity Brok ☐ None of the above | | n 11 U.S.C. § 101(6 | 6)) | | |
| | | | ☐ None of the abo | ve | | | | |
| | are you a small business debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D). | ☐ No. I | am not filing under Cha am filing under Chapter the Bankruptcy Code. am filing under Chapte Bankruptcy Code. | r 11, but I am N | | | | |
| Pai | t 4: Report if You Own or Hav | | | norty That Noor | c Immediate Attent | ion | | |
| . « | Report in 100 Own of flat | re Ally Hazard | ous Property of Ally Pro | perty mat need | 3 milleulate Attent | | | |
| 4. | Do you own or have any property that poses or is | No. | | | | | | |
| | alleged to pose a threat of imminent and | ∐ Yes. | What is the hazard? | | | | | |
| | indentifiable hazard to public health or safety? | | | | | | | |
| | Or do you own any property that needs | | | | | | | |
| | immediate attention? | | If immediate attention is | s needed, why i | s it needed? | | | |
| | | | | | | | | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building | | | | | | | |
| | perishable goods, or livestock | | Whore is the array of 2 | | | | | |
| | perishable goods, or livestock that must be fed, or a building | | Where is the property? | Number | Street | | | |
| | perishable goods, or livestock that must be fed, or a building | | Where is the property? | | Street | | | |
| | perishable goods, or livestock that must be fed, or a building | | Where is the property? | | Street | | | |

Debtor 1

Crystal

Page 5 of 64

Lashone

Brown

Case Number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

| About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|---|---|
| You must check one: | You must check one: |
| I received a briefing from an approved credit | I received a briefing from an approved cred |

counseling agency within the 180 days before filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any,

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must you file. still receive a briefing within 30 days after You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15

| days. | |
|-------------|--|
| | red to receive a briefing about ing because of: |
| Incapacity. | I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances. |
| Disability. | My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I |

reasonably tried to do so. Active duty. I am currently on active military

duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

oved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must you file. still receive a briefing within 30 days after approved You must file a certificate from the agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing ab | out |
|--|-----|
| credit counseling because of: | |

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Crystal Lashone

Debtor 1

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Case Number (if known)

| Pa | rt 6: Answer These Questions | for Reporting Purposes | | |
|-----|--|---|---|--|
| 16. | What kind of debts do you have? | as "incurred by an individual No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily money for a business or inve | consumer debts? Consumer debts are deprimarily for a personal, family, or household publication business debts? Business debts are debts estment or through the operation of the business we that are not consumer debts or business debts. | s that you incurred to obtain |
| 17. | Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | | napter 7. Go to line 18. er 7. Do you estimate that after any exempt p s are paid that funds will be available to distrik | · · · |
| 18. | How many creditors do you estimate that you owe? | ■ 1-49 □ 50-99 □ 100-199 □ 200-999 | ☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000 | ☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000 |
| 19. | How much do you estimate your assets to be worth? | ■ \$0-\$50,000 □ \$50,001-\$100,000 □ \$100,001-\$500,000 □ \$500,001-\$1 million | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| 20. | How much do you estimate your liabilities to be? | □ \$0-\$50,000 ■ \$50,001-\$100,000 □ \$100,001-\$500,000 □ \$500,001-\$1 million | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| Pa | rt 7: Sign Below | | | |
| For | you | correct. If I have chosen to file under Chaptor of title 11, United States Code. I ununder Chapter 7. If no attorney represents me and I this document, I have obtained and I request relief in accordance with I understand making a false statem. | ter 7, I am aware that I may proceed, if eligible inderstand the relief available under each chap did not pay or agree to pay someone who is not read the notice required by 11 U.S.C. § 3420 the chapter of title 11, United States Code, spenent, concealing property, or obtaining money in fines up to \$250,000, or imprisonment for up to \$3571. | e, under Chapter 7, 11,12, or 13 ster, and I choose to proceed not an attorney to help me fill out (b). ecified in this petition. or property by fraud in connection |
| | | ★ Is/ Crystal Lashone Bising Signature of Debtor 1 Executed on 02/03/2017 MM / DD / MM / D | Signa | ture of Debtor 2 uted on MM / DD / YYYY |

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| Debtor 1 | Crystal | Lashone | Brown | Case Number (if known) |
|----------|------------|-------------|-----------|------------------------|
| | First Name | Middle Name | Last Name | |

For your attorney, if you are represented by one

if you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| 🗶 /s/ Kyle Thomas Dallmann | Date | Date: 02/03/2 | 017 |
|--|---------|-------------------|------------|
| Signature of Attorney for Debtor | Buto | MM / DD / YYYY | , |
| Kyle Thomas Dallmann | | | |
| Printed name | | | - |
| Geraci Law L.L.C. | | | |
| Firm name | | | - |
| 55 E. Monroe St., #3400 | | | |
| Number Street | | | - |
| | | | |
| | | | - |
| Chicago | IL | 60603 | - |
| | ILState | 60603 ZIP Code | - |
| Chicago City Contact Phone 312-332-1800 | State | | acilaw.com |
| City | State | ZIP Code | acilaw.com |

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| Fill in this information to identify your case: | | | | | | |
|---|--|-------------|-----------|--|--|--|
| Debtor 1 | Crystal | Lashone | Brown | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| (Spouse, if filing) | tes Bankruptcy Court for the : <u>NORTHERN</u> District of <u>ILLINOIS</u> | | | | | |
| Case Number | Γ | | (State) | | | |
| Spouse, if filing) United States | Bankruptcy Court for | | | | | |

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Community Year Assets | |
|--|--------------------------------------|
| Part 1: Summarize Your Assets | |
| | Your assets Value of what you own |
| Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | <u> </u> |
| 1b. Copy line 62, Total personal property, from Schedule A/B | \$ 39,450 |
| 1c. Copy line 63, Total of all property on Schedule A/B | \$ 39,450 |
| | |
| Part 2: Summarize Your Liabilities | |
| | |
| | Your liabilities Amount you owe |
| Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | |
| | Amount you owe |
| 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | Amount you owe \$27,923 |
| 2a. Copy the total you listed in Column A, <i>Amount of claim,</i> at the bottom of the last page of Part 1 of <i>Schedule D</i> | \$27,923 \$9,508 |
| 2a. Copy the total you listed in Column A, <i>Amount of claim,</i> at the bottom of the last page of Part 1 of <i>Schedule D</i> | \$27,923 \$9,508 |
| 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$27,923 \$9,508 |
| 2a. Copy the total you listed in Column A, <i>Amount of claim,</i> at the bottom of the last page of Part 1 of <i>Schedule D</i> | \$27,923 \$9,508 |

Document Crystal Lashone Case Number (if known) _ Debtor 1 First Name Middle Name Last Name

| Part 4: | Answer These Questions for Administrative and Statistical Records | | | | |
|------------------|---|----------------------------------|-------------|--|--|
| _ | filing for bankruptcy under Chapter 7, 11 or 13? You have nothing to report on this part of the form. Check this box and submit this form to the c | court with your other schedules. | | | |
| Your family | d of debt do you have? debts are primarily consumer debts. Consumer debts are those "incurred by an individual pring, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S. debts are not primarily consumer debts. You have nothing to report on this part of the form. Corm to the court with your other schedules. | C. § 159. | | | |
| | e Statement of Your Current Monthly Income : Copy your total current monthly income from Of 2A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14. | fficial - | \$ 4,735.72 | | |
| | e following special categories of claims from Part 4, line 6 of <i>Schedule E/F</i> : art 4 of Schedule E/F, copy the following: | Total claim | | | |
| 9a. Dome | estic support obligations (Copy line 6a.) | \$_0.00 | | | |
| 9b. Taxe | s and certain other debts you owe the government. (Copy line 6b.) | \$_0.00 | | | |
| 9c. Claim | ns for death or personal injury while you were intoxicated. (Copy line 6c.) | \$_0.00 | | | |
| 9d. Stude | 9d. Student loans. (Copy line 6f.) \$_0.00 | | | | |
| | 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) $$0.00$ | | | | |
| 9f. Debts | s to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | \$_0.00 | | | |
| 9g. Total | I. Add lines 9a through 9f. | \$_0.00 | | | |

| | Caso 1 ⁻ | 7 02200 Doc 1 | Filad 02/02/17 | Entered 02/03/17 12 | .58·18 De | sc Main |
|--|---|---|---|---|------------------------|--|
| Fill in this in | formation to ide | ntify your case and this file | ing: | 0 of 64 | | oo wan |
| Debtor 1 | Crystal | Lashone | Brown | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States | Bankruptcy Court fo | or the : <u>NORTHERN</u> Distri | ict of <u>ILLINOIS</u> | | | |
| Case Number | | | (State) | | | Check if this is an |
| (If known) | | | | | | amended filing |
| Official F | <u>orm 106A</u> | <u>/B</u> | | | | |
| Schedul | e A/B: Pr | operty | | | | 12/15 |
| esponsible for ages, write you on the second of the second | supplying corre ur name and cas Describe Each Re un or have any le Describe | ct information. If more spa e number (if known). Ansv sidence, Building, Land, or C gal or equitable interest in | nce is needed, attach a separa wer every question. Other Real Esate You Own or Ha n any residence, building, land | l, or similar property? | | |
| | - | - | our entries fro Part 1, includir | | > | \$0.00 |
| | Describe Your Vel | sialaa | | | | 40.00 |
| Part 2: | Describe Four Ver | licies | | | | |
| No. Yes. No. Yes. No. Yes. No. Yes. No. Yes. | Describe Make: Model: Year: Approximate Milea Other information: t, aircraft, motor Boats, trailers, motor Describe | homes, ATVs and other re | Who has an interest in the Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtor Check if this is comm instructions) Creational vehicles, other vehicles, snowmobiles, motorcycle | ly e s and another unity property (see icles, and accessories accessories | the amount of any secu | claims or exemptions. Put ared claims on Schedule D: laims Secured by Property Current value of the portion you own? 15,000.00 |
| | | | our entries fro Part 2, includii | ng any entries for pages | | \$ 15,000.00 |
| | | | | | | |
| Part 3: | Describe Your Per | sonal and Household Items | | | | |
| Do you own o | r have any legal | or equitable interest in any | y of the following items? | | | Current value of the portion you own? Do not deduct secured claims or exemptions |
| Examples: | | ishings urniture, linens, china, kitchenw | vare | | | |
| Yes. | Describe | Furniture, linens, small applia | nces, table & chairs, bedroom set | | \$600 | \$ 600.00 |

Filed 02/03/17

Document

Last Name Case 17-03200 Doc 1 Crystal

First Name Middle Name

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| 07. | Electronics | | | | |
|-----|--------------------------------|--|-------|---------------------|------------|
| | Examples: Televisions and ra | adios; audio, video, stereo, and digital equipment; computers, printers, scanners; music | | | |
| | collections; electronic device | s including cell phones, cameras, media players, games | | | |
| | No. | | | | |
| | Yes. Describe | | | | |
| | | Flat screen TV, computer, printer, music collection, cell phone | \$500 | | |
| | | | | s | 500.00 |
| 08. | Collectibles of value | | | | |
| | | rines; paintings, prints, or other artwork; books, pictures, or other art objects; | | | |
| | | collections; other collections, memorabilia, collectibles | | | |
| | No. | | | | |
| | Yes. Describe | | | 1 | |
| | Yes. Describe | | | | 0.00 |
| | | | | | 0.00 |
| 09. | Equipment for sports and | | | | |
| | | shic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes | | | |
| | and kayaks; carpentry tools; | musical instruments | | | |
| | No. | | | _ | |
| | Yes. Describe | | | | |
| | | | | \$ | 0.00 |
| 10. | Firearms | | | | |
| | Examples: Pistols, rifles, sho | tguns, ammunition, and related equipment | | | |
| | No. | | | | |
| | Yes. Describe | | | 1 | |
| | | | | s | 0.00 |
| 11 | Clothes | | | | |
| l | | furs, leather coats, designer wear, shoes, accessories | | | |
| | | ratio, touther could, designer wear, erices, decessiones | | | |
| | No. | | | | |
| | Yes. Describe | | | | |
| | | Normal Clothing, Shoes, Accessories | \$100 | | |
| | | | | \$ | 100.00 |
| 12. | Jewelry | | | | |
| | | costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, | | | |
| | gold, silver | | | | |
| | No. | | | | |
| | Yes. Describe | | | | |
| | | Costume Jewelry | \$100 | | |
| | | | | \$ | 100.00 |
| 13. | Non-farm animals | | | | |
| | Examples: Dogs, cats, birds, | horses | | | |
| | No. | | | | |
| | Yes. Describe | | | 1 | |
| | | | | s | 0.00 |
| 14 | Any other personal and h | ousehold items you did not already list, including any health aids you did not list | | | |
| " | No. | y y | | | |
| | = | | | 1 | |
| | Yes. Describe | | | | |
| | | | | | 0.00 |
| 15. | Add the dollar value of all | of your entries from Part 3, including any entries for pages you have attached | | | \$1,300.00 |
| | for Part 3. Write that num | ber here> | | | φ1,300.00 |
| | | | | | |
| | Describe Your Fi | nancial Assets | | | |
| | | | | | |
| Do | you own or have any lega | I or equitable interest in any of the following? | | Current value of | the |
| | | | | portion you own? | ? |
| | | | | Do not deduct secur | |
| | | | | or exemptions | |
| | | | | | |
| 16. | Cash | | | | |
| 16. | | in your wallet, in your home, in a safe deposit box, and on hand when you file your petition | | | |
| 16. | Examples: Money you have | in your wallet, in your home, in a safe deposit box, and on hand when you file your petition | | | |
| 16. | Examples: Money you have No. | n your wallet, in your home, in a safe deposit box, and on hand when you file your petition | | | |
| 16. | Examples: Money you have | n your wallet, in your home, in a safe deposit box, and on hand when you file your petition | | \$ | 0.00 |

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— Document Page 12 of 64 Humber (if known) Doc 1 Debtor 1

Desc Main

17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each No. Yes. Describe..... Account Type: Institution name: **BMO** Harris 150.00 Checking Account 150.00 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts Nο Describe..... Institution or issuer name: Yes. 0.00 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in No. Describe..... Name of Entity and Percent of Ownership: 0.00 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. No. Yes. Describe..... Issuer name: 0.00 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ٦No. Describe..... Type of account and Institution name: Yes. 401(k) or similar plan T Rowe Price 23,000.00 23,000.00 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications No. Yes. Describe..... Institution name or individual: 0.00 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) Describe..... Issuer name and description: Yes. 0.00 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No. Yes. Describe..... Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 0.00 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers No. Describe..... 0.00 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements Nο Describe..... Yes. 0.00 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No. Yes. Describe.. 0.00

Case 17-03200 Doc 1 Crystal Debtor 1

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Document

Last Name

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Desc Main

First Name

Middle Name

Entered 02/03/17 12:58:18 Page 13 of 64 umber (if known)

| Money or property owed to you? | Current value of the portion you own? Do not deduct secured claims or exemptions |
|--|--|
| 28. Tax refunds owed to you | |
| No. Yes. Describe | \$ 0.00 |
| 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No. | <u>, </u> |
| Yes. Describe | \$ 0.00 |
| 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No. | |
| Yes. Describe | \$ 0.00 |
| 31. Interest in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No. Company Name & Beneficiary: | · |
| Yes. Describe | \$ 0.00 |
| 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No. | \$ |
| Yes. Describe | s 0.00 |
| 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No. | \$ |
| Yes. Describe | \$ 0.00 |
| 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights No. | <u> </u> |
| Yes. Describe | \$ 0.00 |
| 35. Any financial assets you did not already list No. | |
| Yes. Describe | \$0.00 |
| 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached | |
| for Part 4. Write that number here> | \$23,150.00 |
| Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. | |
| 37. Do you own or have any legal or equitable interest in any business-related property? No. | |
| L Yes. | Current value of the portion you own? Do not deduct secured claims or exemptions |
| 38. Accounts receivable or commissions you already earned No. | |
| Yes. Describe | \$ |

Doc 1 Filed 02/03/17 Entered 02/03/17 12:58:18 Desc Main

Page 14 of 64 humber (if known) Debtor 1 Document 39. Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices Yes. Describe..... 0.00 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade Describe..... Yes. 0.00 41. Inventory No. Describe..... Yes. 0.00 42. Interests in partnerships or joint ventures No. Name of Entity and Percent of Ownership: Yes. Describe..... 0.00 43. Customer lists, mailing lists, or other compilations No. Yes. Describe..... 0.00 44. Any business-related property you did not already list Describe..... 0.00 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached \$ 0.00 Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Describe..... Yes 0.00 47. Farm animals Examples: Livestock, poultry, farm-raised fish No. Yes. Describe..... 0.00 48. Crops-either growing or harvested No. Yes. Describe..... 0.00 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade No. Yes. Describe..... 0.00 50. Farm and fishing supplies, chemicals, and feed No. Yes. Describe..... 0.00 51. Any farm- and commercial fishing-related property you did not already list No.

0.00

\$0.00

Yes.

Describe.....

52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached

Case 17-03200 Lashone

63. Total of all property on Schedule A/B. Add line 55 + line 62

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Desc Main

\$39,450.00

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Document Page 15 of 64 Plumber (if known) Crystal First Name Describe All Property You Own or Have an Interest in That You Did Not List Above

| Part 7. Describe All Property You Own or Have an Interest in That You Did Not List | Above | |
|---|--------------|--------------|
| 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No. Yes. Describe | | |
| | | \$0.00 |
| 54. Add the dollar value of all of your entries from Part 7. Write that number here | > | \$0.00 |
| | | |
| Part 8: List the Totals of Each Part of this Form | | |
| 55. Part 1: Total real estate, line 2 | | \$ 0.00 |
| 56. Part 2: Total vehicles, line 5 | \$ 15,000.00 | |
| 57. Part 3: Total personal and household items, line 15 | \$ 1,300.00 | |
| 58. Part 4: Total financial assets, line 36 | \$ 23,150.00 | |
| 59. Part 5: Total business-related property, line 45 | \$ 0.00 | |
| 60. Part 6: Total farm- and fishing-related property, line 52 | \$ 0.00 | |
| 61. Part 7: Total other property not listed, line 54 | \$ 0.00 | |
| 62. Total personal property. Add lines 56 through 61 | \$ 39,450.00 | \$ 39,450.00 |
| | | |

Official Form 106A/B Record # 735270 Schedule A/B: Property Page 6 of 6

| Fill in this information to identify your case: | | | | | | |
|---|----------------------|-------------------------------------|-----------------|--|--|--|
| Debtor 1 | Crystal | Lashone | Brown | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States | Bankruptcy Court for | the : <u>NORTHERN</u> District of _ | ILLINOIS(State) | | | |
| Case Number | r | | (State) | | | |
| (If known) | | | _ | | | |

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions-such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds-may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Part4F Identify the Property Fou Claim as Exempt | | | | | | | | |
|---|---|--------------------------------------|---|------------------------------------|--|--|--|--|
| 1. Which set of ex | emptions are you claiming? Check | k one only, even if your spo | ouse is filing with you. | | | | | |
| You are clai | You are claiming state and federal nonbankruptcy exemptions . 11 U.S.C. § 522(b)(3) | | | | | | | |
| You are clai | You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) | | | | | | | |
| | | | | | | | | |
| 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below. | | | | | | | | |
| | on of the property and line on hat lists this property | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption | | | | |
| | | Copy the value from Schedule A/B | Check only one box for each exemption | | | | | |
| Brief description: | 2016 Jeep Patriot with over 5,000 miles | \$ <u>15,000</u> | \$ _ 2,400 | 735 ILCS 5/12-1001(c) - \$2,400.00 | | | | |
| Line from Schedule A/B: | <u>03</u> | | 100% of fair market value, up to any applicable statutory limit | | | | | |
| Brief description: | Furniture, linens, small appliances, table & chairs, bedroom set | \$_600 | <u></u> \$ | 735 ILCS 5/12-1001(b) - \$600.00 | | | | |
| Line from Schedule A/B: | 06 | | 100% of fair market value, up to any applicable statutory limit | | | | | |
| Brief description: | Flat screen TV, computer, printer, music collection, cell phone | \$_ 500 | <u></u> \$ | 735 ILCS 5/12-1001(b) - \$500.00 | | | | |
| Line from Schedule A/B: | <u>07</u> | | 100% of fair market value, up to any applicable statutory limit | | | | | |
| Brief description: | Normal Clothing, Shoes, Accessories | \$ <u>100</u> | | 735 ILCS 5/12-1001(b) - \$100.00 | | | | |
| Line from Schedule A/B: | <u>11</u> | | 100% of fair market value, up to any applicable statutory limit | | | | | |
| | | | | | | | | |
| Official Form 1060 | Record # 735270 | Schedule C: T | he Property You Claim as Exempt | Page 1 of 2 | | | | |
| | | | • | | | | | |

Debtor 1 Crystal

Lashone

Document

Page 17 of 64 Case Number (if known)

First Name Middle Name Last Name

| | Part 2# Addit | ional Page | | | | |
|----|-------------------------|---|--------------------------------------|---|-----------------------------|-------------|
| | | on of the property and line on that lists this property | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow | exemption |
| | | | Copy the value from Schedule A/B | Check only one box for each exemption | | |
| | Brief description: | Costume Jewelry | \$ <u>100</u> | \$ | 735 ILCS 5/12-1001(b) - \$1 | 00.00 |
| | Line from Schedule A/B: | 12 | | 100% of fair market value, up to any applicable statutory limit | | |
| | Brief description: | Checking Account, BMO Harris, 150.00 | <u>\$_150</u> | \$ | 735 ILCS 5/12-1001(b) - \$1 | 50.00 |
| | Line from Schedule A/B: | <u>17</u> | | 100% of fair market value, up to any applicable statutory limit | | |
| | Brief description: | 401(k) or similar plan, T Rowe Price, 23,000.00 | \$_23,000 | \$ | 735 ILCS 5/12-1006 - \$23,0 | 00.00 |
| | Line from Schedule A/B: | <u>21</u> | | 100% of fair market value, up to any applicable statutory limit | | |
| 3. | Are vou claimin | g a homestead exemption of more | e than \$155.675? | | | |
| | (Subject to adjus | stment on 4/01/16 and every 3 year | | n or after the date of adjustment .) | | |
| | No. | | | | | |
| | L Yes. Did yoι | acquire the property covered by the | ne exemption within 1,215 d | lays before you filed this case? | | |
| | ☐ No | | | | | |
| | ☐ Yes. | | | | | |
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| | · · · · · | 725070 | | | | Done 0 -4.0 |
| 0 | fficial Form 1060 | Record # 735270 | Schedule C: T | he Property You Claim as Exempt | | Page 2 of 2 |

| | nformation to iden | iny your ouco. | | 8 o | | | |
|--|--|--|---|--|--|--|-----------------------------------|
| Debtor 1 | Crystal | Lashor | ne Bro | wn | | | |
| | First Name | Middle Name | Last Na | me | | | |
| Debtor 2 | | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Na | me | | | |
| United State | s Bankruptcy Court fo | r the : <u>NORTHERN</u> | _ District of _ILLINOIS | | | | |
| Case Number | er | | (State |) | | Check if th | is is an |
| (If known) | | | | | | amended f | iling |
| Official F | orm 106D | | | | | | |
| | | ro Who How | - Claima Saaur | ed by Branarty | | | 12 |
| | | | | ed by Property gether, both are equally res | 21.6 | | |
| No. C | theck this box and s | s secured by your p | roperty? e court with your other so | hedules. You have nothing e | alse to report on this form | | |
| Yes. F | fill in all of the inforr | mation below. | | · · | ase to report on this form. | | |
| Part 1: | ill in all of the inforr | | | Ü | | | |
| Part 1: | List All Secured Cl | aims | | | Column A | Column A | Column C |
| Part 1: 2. List all s | List All Secured Cl ecured claims. If a claim. If more than | creditor has more th | an one secured claim, lis articular claim, list the oth al order according to the | t the creditor separately ner creditors in Part 2. | | walle of collateral that supports this | Column C Unsecured portion If any |
| Part 1: 2. List all s for each As much | ecured claims. If a claim. If more than as possible, list the | creditor has more th | articular claim, list the oth al order according to the | t the creditor separately ner creditors in Part 2. | Column A Amount of clai Do not deduct th | walle of collateral that supports this | Unsecured portion |
| Part 1: 2. List all s for each As much 2.1 Chrysi Creditor | List All Secured CI ecured claims. If a claim. If more than as possible, list the | creditor has more th | articular claim, list the oth al order according to the | t the creditor separately ner creditors in Part 2. creditors name. y that secures the claim: | Column A Amount of clai Do not deduct the value of collaters | Value of collateral that supports this claim | Unsecured portion |
| Part 1: 2. List all s for each As much 2.1 Chrysi Creditor | List All Secured CI ecured claims. If a claim. If more than as possible, list the ler Capital s Name | creditor has more th | articular claim, list the oth all order according to the Describe the propert | t the creditor separately ner creditors in Part 2. creditors name. y that secures the claim: | Column A Amount of clai Do not deduct the value of collaters | Value of collateral that supports this claim | Unsecured portion |
| 2. List all s for each As much Chrysi Creditor Po Bo | List All Secured CI ecured claims. If a claim. If more than as possible, list the ler Capital s Name x 961275 | creditor has more th | articular claim, list the other all order according to the Describe the propert 2016 Jeep Patriot with the propert As of the date you file. | t the creditor separately ner creditors in Part 2. creditors name. y that secures the claim: | Column A Amount of clai Do not deduct the value of collaters \$ 27,923.00 | Value of collateral that supports this claim | Unsecured portion |
| 2. List all s for each As much Chrysi Creditor Po Bo | ecured claims. If a claim. If more than as possible, list the ler Capital s Name x 961275 | creditor has more th | articular claim, list the other all order according to the Describe the propert 2016 Jeep Patriot with As of the date you fill Contingent | t the creditor separately her creditors in Part 2. creditors name. y that secures the claim: th over 5,000 miles | Column A Amount of clai Do not deduct the value of collaters \$ 27,923.00 | Value of collateral that supports this claim | Unsecured portion |
| 2. List all s for each As much 2.1 Chrysi Creditor Po Bo Number | ecured claims. If a claim. If more than as possible, list the ler Capital s Name x 961275 | creditor has more th one creditor has a p e claims in alphabetic | articular claim, list the other all order according to the Describe the propert 2016 Jeep Patriot with As of the date you fill Contingent Unliquidated | t the creditor separately her creditors in Part 2. creditors name. y that secures the claim: th over 5,000 miles | Column A Amount of clai Do not deduct the value of collaters \$ 27,923.00 | Value of collateral that supports this claim | Unsecured portion |
| 2. List all so for each As much 2.1 Chrysic Creditor Po Bo. Number Fort W. City | ecured claims. If a claim. If more than as possible, list the ler Capital s Name x 961275 Street | creditor has more the one creditor has a percentage of the claims in alphabetic of the | articular claim, list the other all order according to the Describe the propert 2016 Jeep Patriot with As of the date you fill Contingent Unliquidated Disputed | t the creditor separately her creditors in Part 2. creditors name. y that secures the claim: th over 5,000 miles e, the claim is: Check all that a | Column A Amount of clai Do not deduct the value of collaters \$ 27,923.00 | Value of collateral that supports this claim | Unsecured portion |
| 2. List all s for each As much 2.1 Chrysi Creditor Po Bo Number Fort W City Who owe | ecured claims. If a claim. If more than as possible, list the ler Capital s Name x 961275 | creditor has more the one creditor has a percentage of the claims in alphabetic of the | articular claim, list the other all order according to the Describe the propert 2016 Jeep Patriot with As of the date you fill Contingent Unliquidated Disputed Nature of Lien. Check | t the creditor separately her creditors in Part 2. creditors name. y that secures the claim: th over 5,000 miles e, the claim is: Check all that a | Column A Amount of clai Do not deduct the value of collaters \$ 27,923.00 apply. | Value of collateral that supports this claim | Unsecured portion |
| 2. List all s for each As much 2.1 Chrysl Creditor Po Bo Number Fort W City Who owe | ecured claims. If a claim. If more than as possible, list the ler Capital s Name x 961275 Street | creditor has more the one creditor has a percentage of the claims in alphabetic of the | articular claim, list the other all order according to the Describe the propert 2016 Jeep Patriot with As of the date you fill Contingent Unliquidated Disputed Nature of Lien. Check | t the creditor separately her creditors in Part 2. creditors name. y that secures the claim: th over 5,000 miles e, the claim is: Check all that a | Column A Amount of clai Do not deduct the value of collaters \$ 27,923.00 apply. | Value of collateral that supports this claim | Unsecured portion |
| 2. List all so for each As much 2.1 Chrys Creditor Po Bo Number Fort W City Who owe | ecured claims. If a claim. If more than as possible, list the ler Capital s Name x 961275 Street | creditor has more the one creditor has a percentage of the claims in alphabetic of the | articular claim, list the other all order according to the Describe the propert 2016 Jeep Patriot with As of the date you fill Contingent Unliquidated Disputed Nature of Lien. Check an agreement you car loan) | t the creditor separately her creditors in Part 2. creditors name. y that secures the claim: th over 5,000 miles e, the claim is: Check all that a | Column A Amount of clai Do not deduct the value of collaters \$ 27,923.00 apply. | Value of collateral that supports this claim | Unsecured portion |
| 2. List all s for each As much 2.1 Chrys Creditor Po Bo Number Fort W City Who owe Debto Debto Debto | ecured claims. If a claim. If more than as possible, list the ler Capital s Name x 961275 Street | creditor has more the one creditor has a per claims in alphabetic state. TX 76161 State Zip Code ne. | articular claim, list the other all order according to the Describe the propert 2016 Jeep Patriot with As of the date you fill Contingent Unliquidated Disputed Nature of Lien. Check an agreement you car loan) | t the creditor separately ner creditors in Part 2. creditors name. y that secures the claim: th over 5,000 miles e, the claim is: Check all that a k all that apply. made (such as mortgage or secu- as tax lien, mechanic's lien) | Column A Amount of clai Do not deduct the value of collaters \$ 27,923.00 apply. | Value of collateral that supports this claim | Unsecured portion |
| 2. List all s for each As much 2.1 Chrys Creditor Po Bo Number Fort W City Who owe Debto Debto At leas | List All Secured Cl ecured claims. If a claim. If more than as possible, list the ler Capital s Name x 961275 Street /orth es the debt? Check o r 1 only r 2 only r 1 and Debtor 2 only | TX 76161 State Zip Code | articular claim, list the other all order according to the Describe the propert 2016 Jeep Patriot with As of the date you fill Contingent Unliquidated Disputed Nature of Lien. Chector and Chector Ioann) Statutory lien (such | t the creditor separately ner creditors in Part 2. creditors name. y that secures the claim: th over 5,000 miles e, the claim is: Check all that a k all that apply. made (such as mortgage or secu- as tax lien, mechanic's lien) a lawsuit | Column A Amount of clai Do not deduct the value of collaters \$ 27,923.00 apply. | Value of collateral that supports this claim | Unsecured portion |

| Fill | in this | Case 17 02200 s information to identify your case | | ilad 02/02/17 | | 02/03/17 12:5 f 64 | 8:18 [| Desc Main | |
|-------------------------|-------------------|--|---|--|--------------------|--------------------------|------------------|--------------------|-------------|
| Do | htor 1 | Crystal L | ashone | Brown | | | | | |
| De | btor 1 | | ddle Name | Last Name | | | | | |
| De | btor 2 | | | | | | | | |
| (Spo | ouse, if filin | g) First Name Mid | ddle Name | Last Name | | | | | |
| Un | ited Sta | tes Bankruptcy Court for the : <u>NORTI</u> | HERN District of IL | LINOIS | | | | | |
| | | | | (State) | | | | ☐ Check if | this is an |
| | se Num known) | ber | | | | | | amended | |
| ⊃ffi. | cial | Form 106E/F | | | | | | | g |
| יוווע | Clai | I UIIII IUUL/I | | | | | | | 40/45 |
| <u>ìch</u> | <u>edu</u> | <u>le E/F: Creditors Who</u> | Have Unse | ecured Claims | | | | | 12/15 |
| redito eede op of | ors wit d, cop | y (Official Form 106A/B) and on S h partially secured claims that are y the Part you need, fill it out, nun Iditional pages, write your name a | e listed in <i>Schedul</i> e nber the entries in and case number (i | e <i>D: Creditors Who Have</i> the boxes on the left. Att | Claims Secure | ed by Property. If mor | re space is | e any | |
| 1 D | o any (| creditors have priority unsecured | claime against you | 12 | | | | | |
| | _ ` | | ciaillis agailist you | | | | | | |
| | | Go to Part 2. | | | | | | | |
| | Yes. | of your priority uncocured claims | If a creditor has me | ore than one priority unego | sured claim liet | the creditor congrately | y for each cla | im For | |
| | | of your priority unsecured claims. im listed, identify what type of clain | | · • | | - | | | |
| | | ity amounts. As much as possible, | • | _ | | ·- | | · - | |
| | | ed claims, fill out the Continuation F explanation of each type of claim, s | - | | • | aim, list the other cred | litors in Part 3 | . | |
| ν. | 0. 0 | oxpianation of outling type of claim, o | | | | То | tal claim | Priority | Nonpriority |
| | Line | Daisaite Daht | | | | | F70.00 | amount | amount |
| 2.1 |] — | Priority Debt or's Name | _ Last 4 di | gits of account number | | \$ <u></u> | 2,572.00 | \$ <u>2,572.00</u> | \$_0.00 |
| | | Box 7346 | When wa | as the debt incurred? | 2015 | | | | |
| | Numb | er Street | | | | | | | |
| | | | As of the | e date you file, the claim is | : Check all that a | apply. | | | |
| | Phila | delphia PA 19101 | Conti | ngent | | | | | |
| | City | State Zip Co | _ Unliqi | uidated | | | | | |
| ' | _ | ves the debt? Check one. | Dispu | ited | | | | | |
| | = | tor 1 only | | | | | | | |
| | = | tor 2 only | | PRIORITY unsecured claim | 1: | | | | |
| | = | tor 1 and Debtor 2 only east one of the debtors and another | | estic support obligations s and certain other debts you | owe the governm | ent | | | |
| | = | ck if this claim relates to a | Taxes | Jana contain calci debia you | one the governm | | | | |
| ı | _ | nmunity debt | Claim | s for death or personal injury | while you were | | | | |
| ! | | laim subject to offest? | intoxi | | • | | | | |
| | No | | Other | . Specify | | | | | |
| | Yes | | | | _ | | | | |

Filed 02/03/17 Entered 02/03/17 12:58:18 Desc Main Case 17-03200 Doc 1 Page 20 of 64 Case Number (if known) **Document** Crystal Lashone Debtor 1 Your PRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth. Total claim **Priority** Nonpriority amount amount IRS Priority Debt \$ 3,382.00 \$ 3,382.00 \$ 0.00 2.2 Last 4 digits of account number _ Creditor's Name 2014 PO Box 7346 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Philadelphia PA 19101 Unliquidated

| Who owes the debt? Check one. | Disputed | |
|--|--|---|
| Debtor 1 only | | |
| Debtor 2 only | Type of PRIORITY unsecured claim: | |
| Debtor 1 and Debtor 2 only | Domestic support obligations | |
| At least one of the debtors and another | Taxes and certain other debts you owe the government | |
| Check if this claim relates to a | | |
| community debt | Claims for death or personal injury while you were | |
| Is the claim subject to offest? | intoxicated | |
| No | Other. Specify | |
| Yes | | |
| 2.3 IRS Priority Debt | Last 4 digits of account number \$_3, | <u>554.00</u> <u>\$3,554.00</u> <u>\$0.00</u> |
| Creditor's Name | 2016 | |
| PO Box 7346 | When was the debt incurred? 2016 | |
| Number Street | | |
| | As of the date you file, the claim is: Check all that apply. | |
| | Contingent | |
| Philadelphia PA 19101 | ☐ Unliquidated | |
| City State Zip Code Who owes the debt? Check one. | Disputed | |
| | П | |
| Debtor 1 only | | |
| Debtor 2 only | Type of PRIORITY unsecured claim: | |
| Debtor 1 and Debtor 2 only | Domestic support obligations | |
| At least one of the debtors and another | Taxes and certain other debts you owe the government | |
| Check if this claim relates to a | _ | |
| community debt | Claims for death or personal injury while you were | |
| Is the claim subject to offest? | intoxicated | |
| No | Other. Specify | |
| Yes | | |

Yes.

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already

included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured

claims fill out the Continuation Page of Part 2.

List All of Your NONPRIORITY Unsecured Claims

No. You have nothing to report in this part. Submit this form to the court with your other schedules.

3. Do any creditors have nonpriority unsecured claims against you?

Total claim

| Debtor 1 | Crystal Lashone | Page 21 of 64 Case Number (if known) | _ |
|----------|---|---|--------------------|
| | First Name Middle Name | Last Name | |
| 4.1 | Bank of America | Last 4 digits of account number | <u>\$ 623.00</u> |
| | Creditor's Name 4161 Piedmont Pkwy | When was the debt incurred? | |
| | Number Street | when was the dept incurred? | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | Greensboro NC 27410 | Contingent | |
| | City State Zip Code | Unliquidated | |
| w | /ho owes the debt? Check one. | Disputed | |
| | Debtor 1 only | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| ΙĒ | Check if this claim relates to a | that you did not report as priority claims | |
| - | community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| Is | s the claim subject to offest? | | |
| | No | Other. Specify Credit Card or Credit Use | |
| \vdash | Yes City of Chicago - Dept of Revenue | | \$ 1,000.00 |
| 4.2 | | Last 4 digits of account number | \$_1,000.00 |
| | Creditor's Name 121 N. LaSalle St | When was the debt incurred? | |
| | Number Street | | |
| | Room 107 | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | Chicago IL 60602 | Contingent | |
| | City State Zip Code | Unliquidated | |
| <u> </u> | /ho owes the debt? Check one. | Disputed | |
| <u> </u> | Debtor 1 only | | |
| <u>L</u> | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| [| Debtor 1 and Debtor 2 only | Student loans | |
| L | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| | Check if this claim relates to a | that you did not report as priority claims | |
| | community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| IS | s the claim subject to offest? | Finan | |
| 7 | Yes | Other. Specify Fines | |
| 4.3 | Cmre. 877-572-7555 | Last 4 digits of account number 5085 | \$ 646.00 |
| 7.0 | Creditor's Name | | |
| | 3075 E Imperial Hwy Ste | When was the debt incurred? 2016-2016 | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Brea CA 92821 | ☐ Unliquidated | |
| ١,,, | City State Zip Code /ho owes the debt? Check one. | Disputed | |
| " | | | |
| | Debtor 1 only | Torres (NONDRIODITY and a second of the | |
| - | Debtor 2 only | Type of NONPRIORITY unsecured claim: Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors and another | Unligations arising out or a separation agreement or divorce that you did not report as priority claims | |
| L | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| Is | the claim subject to offest? | Debte to periodici of profesitating plans, and other offilial debts | |
| | No | Other. Specify Medical Debt | |
| | Yes | Outon Opposity | |

Filed 02/03/17 Entered 02/03/17 12:58:18 Desc Main Case 17-03200 Doc 1 Page 22 of 64 Case Number (if known) **Document** Crystal Lashone Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim** 4.4 Comcast \$ 285.00 Last 4 digits of account number

| 7.7 | _ | | |
|-----|--|---|--------------------|
| | Creditor's Name | When was the debt incurred? 2016-2016 | |
| | Po Box 3097 | When was the debt incurred? | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Bloomington IL 61702 | Unliquidated | |
| | City State Zip Code | | |
| | Who owes the debt? Check one. | Disputed | |
| | Debtor 1 only | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| | Check if this claim relates to a | that you did not report as priority claims | |
| | community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offest? | books to periodical of profit ordaling plants, and other climinal dobbs | |
| | No | Other. Specify Collecting for Creditor | |
| | Yes | Other. Specify Otherstring for Oreation | |
| 4.5 | Commonwealth Edison | Last 4 digits of account number | \$ 1,200.00 |
| 4.5 | Creditor's Name | Last 4 digits of account number | <u> </u> |
| | 3 Lincoln Center 4th Floor | When was the debt incurred? | |
| | Number Street | | |
| | Number Sueet | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | 0.11 1.7 | Contingent | |
| | Oakbrook Terrace IL 60181 | Unliquidated | |
| | City State Zip Code Who owes the debt? Check one. | Disputed | |
| | | | |
| | Debtor 1 only | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| | Check if this claim relates to a | that you did not report as priority claims | |
| | community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offest? | | |
| | No | Other. SpecifyUtility Bills/Cellular Service | |
| | Yes | _ | |
| 4.6 | Credit ONE BANK NA | Last 4 digits of account numberNULL | <u>\$ 319.00</u> |
| | Creditor's Name | 2012 2012 | |
| | Po Box 98875 | When was the debt incurred? 2016-2016 | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Las Vegas NV 89193 | | |
| | City State Zip Code | Unliquidated | |
| | Who owes the debt? Check one. | Disputed | |
| | Debtor 1 only | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| | | that you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offest? | E cope to pension of profit-straining plans, and other similal debts | |
| | No | Other. Specify Credit Card or Credit Use | |
| | Yes | Other, specify | |
| | ☐ 1 co | | |

Case 17-03200 Doc 1 Filed 02/03/17 Entered 02/03/17 12:58:18 Desc Main Page 23 of 64 Case Number (if known) **Document** Debtor 1 Crystal Lashone Your NONPRIORITY Unsecured Claims - Continuation Page

| After listing | g any entries on this page, number them be | ginning with 4.4, followed by 4.5, and so forth. | Total Claim |
|-----------------|--|---|------------------|
| 4.7 Eld | dorado Resorts Corp | Last 4 digits of account number | \$ <u>0.00</u> |
| | ditor's Name | · ——— | |
| 30 | 15 North Ocean Blvd, Ste 119 | When was the debt incurred? | |
| Nur | mber Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| Foi | rt Lauderdale FL 33308 | Unliquidated | |
| City | • | Disputed | |
| | owes the debt? Check one. | | |
| _ = | ebtor 1 only | | |
| | ebtor 2 only | Type of NONPRIORITY unsecured claim: | |
| _ = | ebtor 1 and Debtor 2 only | Student loans | |
| _ = | least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| | heck if this claim relates to a | that you did not report as priority claims | |
| | ommunity debt claim subject to offest? | Debts to pension or profit-sharing plans, and other similar debts | |
| No | | Other Cossifi. | |
| T _{Ye} | | Other. Specify | |
| | MG of Illinois | Last 4 digits of account number | \$ <u>864.00</u> |
| | ditor's Name | · ——— | |
| PO | Box 96408 | When was the debt incurred? | |
| Nur | nber Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| _ | | Contingent | |
| Ok | lahoma City OK 73143 | ☐ Unliquidated | |
| City | | Disputed | |
| | owes the debt? Check one. | Disputed | |
| _ = | ebtor 1 only | | |
| _ = | ebtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | ebtor 1 and Debtor 2 only | Student loans | |
| At | least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| | heck if this claim relates to a | that you did not report as priority claims | |
| | ommunity debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | claim subject to offest? | _ | |
| ■ No | | Other. Specify | |
| Ye Fir | es st Premier BANK | Last 4 digits of account number NULL | \$ 241.00 |
| 4.9 | ditor's Name | Last 4 digits of account number | <u> </u> |
| | 1 S Minnesota Ave | When was the debt incurred? 2016-2016 | |
| Nur | | | |
| | | | |
| - | | As of the date you file, the claim is: Check all that apply. | |
| Sig | oux Falls SD 57104 | Contingent | |
| City | | Unliquidated | |
| | owes the debt? Check one. | Disputed | |
| De | ebtor 1 only | | |
| De | ebtor 2 only | Type of NONPRIORITY unsecured claim: | |
| De | ebtor 1 and Debtor 2 only | Student loans | |
| At | least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| _ = | heck if this claim relates to a | that you did not report as priority claims | |
| _ | ommunity debt | Debts to pension or profit-sharing plans, and other similar debts | |
| Is the | claim subject to offest? | | |
| No | 0 | Other. Specify Credit Card or Credit Use | |
| Ye | es | | |

Page 24 of 64 Case Number (if known) **Document** Debtor 1 Crystal Lashone

Your NONPRIORITY Unsecured Claims - Continuation Page

| After lis | sting any entries on this page, number them be | ginning with 4.4, followed by 4.5, and so forth. | Total Claim | | | | |
|-----------|--|--|--------------------|--|--|--|--|
| 4.10 | GO Financial | Last 4 digits of account number | \$ 6,000.00 | | | | |
| 7.10 | Creditor's Name | | | | | | |
| | 4020 E Indian School Rd | When was the debt incurred? | | | | | |
| | Number Street | | | | | | |
| | rames. | | | | | | |
| | | As of the date you file, the claim is: Check all that apply. | | | | | |
| | Dhaanin | Contingent | | | | | |
| | Phoenix AZ 85018 | Unliquidated | | | | | |
| v | City State Zip Code Vho owes the debt? Check one. | Disputed | | | | | |
| | Debtor 1 only | | | | | | |
| | ≒ ′ | | | | | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Student loans | | | | | |
| <u> </u> | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | | | | | |
| [| Check if this claim relates to a | that you did not report as priority claims | | | | | |
| | community debt | Debts to pension or profit-sharing plans, and other similar debts | | | | | |
| | s the claim subject to offest? | _ | | | | | |
| | No | Other. Specify | | | | | |
| | Yes | | . 040.00 | | | | |
| 4.11 | Great Lakes Specialty Fin. | Last 4 digits of account number | \$ <u>646.00</u> | | | | |
| | Creditor's Name | NVI (1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | | | | |
| | 3125 S. Ashland Ave., #206 | When was the debt incurred? | | | | | |
| | Number Street | | | | | | |
| | | As of the date you file, the claim is: Check all that apply. | | | | | |
| | | Contingent | | | | | |
| | Chicago IL 60608 | Unliquidated | | | | | |
| l | City State Zip Code | Disputed | | | | | |
| Y | Who owes the debt? Check one. | Disputed | | | | | |
| <u> </u> | Debtor 1 only | | | | | | |
| L | Debtor 2 only | Type of NONPRIORITY unsecured claim: | | | | | |
| [| Debtor 1 and Debtor 2 only | Student loans | | | | | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | | | | | |
| Ī | Check if this claim relates to a | that you did not report as priority claims | | | | | |
| - | community debt | Debts to pension or profit-sharing plans, and other similar debts | | | | | |
| Is | s the claim subject to offest? | | | | | | |
| | No | Other. Specify PayDay Loan | | | | | |
| | Yes | | | | | | |
| 4.12 | Heritage Acceptance | Last 4 digits of account number | \$ 7,515.00 | | | | |
| | Creditor's Name | | | | | | |
| | 120 West Lexington Avenue | When was the debt incurred? | | | | | |
| | Number Street | | | | | | |
| 1 | | As of the date you file, the claim is: Check all that apply. | | | | | |
| | | Contingent | | | | | |
| 1 | Elkhart IN 46516 | | | | | | |
| | City State Zip Code | Unliquidated | | | | | |
| _ v | Who owes the debt? Check one. | Disputed | | | | | |
| [| Debtor 1 only | | | | | | |
| [| Debtor 2 only | Type of NONPRIORITY unsecured claim: | | | | | |
| Ī | Debtor 1 and Debtor 2 only | Student loans | | | | | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | | | | | |
| | Check if this claim relates to a | that you did not report as priority claims | | | | | |
| | community debt | Debts to pension or profit-sharing plans, and other similar debts | | | | | |
| ls | s the claim subject to offest? | = ==== 1. Fellowing point and many points, and out of similar doubte | | | | | |
| | No | Other. Specify | | | | | |
| | Yes | ошог. ороону | | | | | |
| | | | | | | | |

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Case Number (if known) **Document** Crystal Lashone Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim** 4.13 Honor Finance Last 4 digits of account number _____8501_ **\$** 5,153.00

| Creditor's Name 909 Davis St Ste 260 | When was the debt incurred? 2015-04-20 | |
|---|---|--------------------|
| Number Street | | |
| | As of the date you file, the claim is: Check all that apply. | |
| | Contingent | |
| Evanston IL 60201 | Unliquidated | |
| City State Zip Code Who owes the debt? Check one. | Disputed | |
| Debtor 1 only | | |
| Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 and Debtor 2 only | Student loans | |
| At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| Check if this claim relates to a | that you did not report as priority claims | |
| community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| Is the claim subject to offest? | | |
| No | Other. Specify | |
| Yes A 14 JTM Capital Managment | Land A diable of a county months | \$ 1,992.00 |
| Creditor's Name | Last 4 digits of account number | \$ <u>1,002.00</u> |
| PO Box 7200 | When was the debt incurred? | |
| Number Street | | |
| | As of the date you file, the claim is: Check all that apply. | |
| | Contingent | |
| New York NY 10008 | Unliquidated | |
| City State Zip Code | Disputed | |
| Who owes the debt? Check one. | Disputed | |
| Debtor 1 only | | |
| Debtor 2 only | Type of NONPRIORITY unsecured claim: ☐ | |
| Debtor 1 and Debtor 2 only | Student loans | |
| At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| Check if this claim relates to a | that you did not report as priority claims | |
| community debt Is the claim subject to offest? | Debts to pension or profit-sharing plans, and other similar debts | |
| No | Other Courie | |
| Yes | Other. Specify | |
| 4.15 Nationwide Credit & CO | Last 4 digits of account number 9200 | \$ <u>441.00</u> |
| Creditor's Name | When was the debt incurred? 2016-2016 | |
| 815 Commerce Dr Ste 270 | When was the debt incurred? 2016-2016 | |
| Number Street | | |
| | As of the date you file, the claim is: Check all that apply. | |
| Oak Brook IL 60523 | Contingent | |
| City State Zip Code | Unliquidated | |
| Who owes the debt? Check one. | Disputed | |
| Debtor 1 only | | |
| Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 and Debtor 2 only | Student loans | |
| At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| Check if this claim relates to a | that you did not report as priority claims | |
| community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| Is the claim subject to offest? | Madical Date | |
| No Yes | Other. Specify Medical Debt | |
| res | | |

Case 17-03200 Doc 1 Filed 02/03/17 Entered 02/03/17 12:58:18 Desc Main Page 26 of 64 Case Number (if known) **Pocument** Debtor 1 Crystal Lashone Your NONPRIORITY Unsecured Claims - Continuation Page

| After lis | sting any entries on this page, number them b | eginning with 4.4, followed by 4.5, ar | nd so forth. | Total Claim |
|-----------|---|---|-------------------------------|--------------------|
| 4.16 | Nationwide Loans LLC | Last 4 digits of account number | | \$ <u>878.00</u> |
| | Creditor's Name | When we the day | 2012-2013 | |
| | 3435 N Cicero Ave | When was the debt incurred? | 2012 2010 | |
| | Number Street | | | |
| | | As of the date you file, the claim is: | Check all that apply. | |
| | Chicago II 60644 | Contingent | | |
| | Chicago IL 60641 City State Zip Code | Unliquidated | | |
| v | /ho owes the debt? Check one. | Disputed | | |
| | Debtor 1 only | | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured | claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | | |
| | At least one of the debtors and another | Obligations arising out of a separati | ion agreement or divorce | |
| ΙĪ | Check if this claim relates to a | that you did not report as priority cla | aims | |
| _ | community debt | Debts to pension or profit-sharing p | lans, and other similar debts | |
| Is | the claim subject to offest? | | | |
| | No | Other. Specify | | |
| | Yes Personal Finance | Look dell'alter of consent according | 5101 | \$ 1,649.00 |
| 4.17 | Creditor's Name | Last 4 digits of account number | | 3 _1,040.00 |
| | 1151 S Lee St | When was the debt incurred? | 2012-2013 | |
| | Number Street | | | |
| | | As of the date you file, the claim is: | Check all that apply | |
| | | Contingent | . Oneck all that apply. | |
| | Des Plaines IL 60016 | Unliquidated | | |
| | City State Zip Code | Disputed | | |
| Y | /ho owes the debt? Check one. | Disputed | | |
| | Debtor 1 only | | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured | claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | | |
| <u> </u> | At least one of the debtors and another | Obligations arising out of a separati | - | |
| L | Check if this claim relates to a community debt | that you did not report as priority cla Debts to pension or profit-sharing p | | |
| ls | the claim subject to offest? | Debts to pension of profit-sharing p | ians, and other similar debts | |
| | No | Other. Specify Personal Loan | | |
| | Yes | | | |
| 4.18 | Rush University Medical Group | Last 4 digits of account number | | <u>\$ 261.00</u> |
| | Creditor's Name | | | |
| | 75 Remittance Dr., Dept. 1611 | When was the debt incurred? | | |
| | Number Street | | | |
| | | As of the date you file, the claim is: | Check all that apply. | |
| | Chicago IL 60675 | Contingent | | |
| | City State Zip Code | Unliquidated | | |
| v | /ho owes the debt? Check one. | Disputed | | |
| | Debtor 1 only | | | |
| [| Debtor 2 only | Type of NONPRIORITY unsecured of | claim: | |
| [| Debtor 1 and Debtor 2 only | Student loans | | |
| [| At least one of the debtors and another | Obligations arising out of a separati | ion agreement or divorce | |
| Γ | Check if this claim relates to a | that you did not report as priority cla | aims | |
| | community debt | Debts to pension or profit-sharing p | lans, and other similar debts | |
| Is | s the claim subject to offest? | _ | | |
| | No | Other. Specify Medical/Dental | Services | |
| | Yes | | | |

Debtor 1 Crystal Lashone Document Page 27 of 64 Case Number (if known)

Your NONPRIORITY Unsecured Claims - Continuation Page

| After li | sting any entries on this page, number them b | peginning with 4.4, followed by 4.5, and so forth. | Total Claim |
|----------|--|--|--------------------|
| 4.19 | T-Mobile | Last 4 digits of account number0228 | <u>\$ 664.00</u> |
| | Creditor's Name | <u> </u> | |
| | 4120 International Pkwy | When was the debt incurred? 2016-2016 | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | | | |
| | Carrollton TX 75007 | Contingent | |
| | City State Zip Code | Unliquidated | |
| v | Vho owes the debt? Check one. | Disputed | |
| | Debtor 1 only | | |
| ΙГ | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| Ī | Debtor 1 and Debtor 2 only | Student loans | |
| l ř | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| } | = | that you did not report as priority claims | |
| " | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| ls ls | s the claim subject to offest? | Debte to periodic of profit charmy plane, and early chimical debte | |
| | No | Other. Specify Collecting for Creditor | |
| Ī | Yes | Other. Specify Odicoting for Oreanor | |
| 4.20 | The Loan Approval Center | Last 4 digits of account number | \$ 3,500.00 |
| 7.20 | Creditor's Name | | · |
| | 1505 N. Manheim Rd | When was the debt incurred? | |
| | Number Street | | |
| | | As a fitting distances file the state to Other Hills to a fi | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | Stone Park IL 60165 | Contingent | |
| | City State Zip Code | Unliquidated | |
| V | Who owes the debt? Check one. | Disputed | |
| Ιг | Debtor 1 only | | |
| lī | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| l i | Debtor 1 and Debtor 2 only | Student loans | |
| F | = | Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors and another | that you did not report as priority claims | |
| L | Check if this claim relates to a | | |
| 1 | community debt s the claim subject to offest? | Debts to pension or profit-sharing plans, and other similar debts | |
| ì | No | Other, Specify Deficiency, Repo'd/Surr'd Auto | |
| l i | Yes | Other. Specify Deficiency, Repo'd/Surr'd Auto | |
| 4.04 | Webbank/FINGERHUT FRES | Last 4 digits of account number 4261 | \$ 91.00 |
| 4.21 | Creditor's Name | Last 4 digits of account number | <u> </u> |
| | 6250 Ridgewood Rd | When was the debt incurred? 2016-2016 | |
| | Number Street | | |
| | Namber Sacci | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | Saint Cloud MN 56303 | Contingent | |
| | | Unliquidated | |
| v | City State Zip Code Vho owes the debt? Check one. | Disputed | |
| | Debtor 1 only | | |
| | = ' | Turns of NONDRIORITY unpassured alaims | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | ☐ Student loans | |
| L | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| | Check if this claim relates to a | that you did not report as priority claims | |
| | community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | s the claim subject to offest? | <u>_</u> | |
| | No | Other. Specify | |
| | Yes | | |

Case 17-03200 Doc 1 Page 28 of 64 Case Number (if known) **Document** Crystal Lashone Debtor 1 First Name West Suburban Medical Center \$ 668.00 4.22 Last 4 digits of account number Creditor's Name 3 Erie Ct. When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Oak Park Unliquidated City State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Student loans Debtor 1 and Debtor 2 only At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offest? Other. Specify ___Medical/Dental Services List Others to Be Notified for a Debt That You Already Listed Part 3: 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Weltman Weinberg and Reis On which entry in Part 1 or Part 2 list the original creditor? Name 323 W Lakeside Ave Ste 200 Line 12 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Number Street

Last 4 digits of account number ____ ___

OH 44113

State Zip Code

Cleveland

Official Form 106E/F

City

Doc 1 Filed 02/03/17 Entered 02/03/17 12:58:18 Desc Main Case 17-03200

Page 29 of 64 Case Number (if known) **Document** Debtor 1 Crystal Lashone

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

| | | | Total claim |
|--------------------------|--|------------|-------------|
| Total claims | 6a. Domestic support obligations | 6a. | \$0.00 |
| from Part 1 | 6b. Taxes and Certain other debts you owe the government | 6b. | \$9,508.00 |
| | 6c. Claims for death or personal injury while you were intoxicated | 6c. | \$0.00 |
| | 6d. Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$0.00 |
| | 6e. Total. Add lines 6a through 6d. | 6e. | \$9,508.00 |
| | | | Total claim |
| Total claims from Part 2 | 6f. Student loans | | ¢ 0.00 |
| IIOIII Fait 2 | oi. Student loans | 6f. | \$0.00 |
| | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6f. 6g. | \$ |
| | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority | | Φ |
| | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other | 6g. | \$0.00 |

Schedule E/F: Creditors Who Have Unsecured Claims

| Fil | l in this in | Caso 17 formation to ider | | Filad 02/02/17 | Entered 02/03/17 12 0 of 64 | .:58:18 Desc Mai | in |
|-----------------------------|--|--|--|---|---|--|-------------------------------|
| De | ebtor 1 | Crystal | Lashone | Brown | | | |
| | | First Name | Middle Name | Last Name | | | |
| | ebtor 2 pouse, if filing) | First Name | Middle Name | Last Name | | | |
| Ur | nited States | Bankruptcy Court fo | r the : <u>NORTHERN</u> District of | | | | |
| | ase Number | | | (State) | | | k if this is an ded filing |
| Offi | icial Fo | orm 106G | | | | amon | aca ming |
| | | | ory Contracts and | Uneynired Lea | SAS | | 12/15 |
| nformadditi 1. D 2. Li ex | nation. If nonal pages o you hav No. Ch Yes. Fill ist separat xample, re | nore space is needs, write your name any executory eck this box and so in all of the informely each personnt, vehicle lease, | eded, copy the additional page ne and case number (if known) contracts or unexpired leases submit this form to the court wit mation below even if the contra or company with whom you h | e, fill it out, number the end. ? th your other schedules. Your or leases are listed in averthe contract or lease | n are equally responsible for supply itries, and attach it to this page. On ou have nothing else to report on this schedule A/B: Property (Official Form Then state what each contract or I uction booklet for more examples of | n the top of any s form. m 106A/B) lease is for (for | |
| | nexpired le | | hom you have the contract or | lease | State what the con | ntract or lease is for | |
| 2.1 | | | | | | | |
| | Name | | | | - | | |
| | Number | Street | | | | | |
| | City | | State Zip |) Code | - | | |
| 2.2 | | | | | | | |
| | Name | | | | | | |
| | Number | Street | | | | | |
| | City | | State Zip | Code | - | | |
| 2.3 | | | | | | | |
| | Name | | | | | | |
| | Number | Street | | | | | |
| | City | | State Zip | Code | | | |
| 2.4 | | | | | | | |
| | Name | | | | | | |
| | Number | Street | | | - | | |
| | City | | State Zip | Code | - | | |
| 2.5 | | | | | | | |
| | Name | | | | | | |
| | Number | Street | | | - | | |

State Zip Code

City

| Fill in this inf | formation to ider | ntify your case: | |
|---------------------|---------------------|--|-----------|
| Debtor 1 | Crystal | Lashone | Brown |
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States I | Bankruptcy Court fo | or the : <u>NORTHERN</u> District of <u>IL</u> | |
| Case Number | | | (State) |
| (If known) | | | |

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

| any A | dditional Pages, write your name ar | nd case number (if known). Answ | er every question. | |
|-------------|---|--|----------------------|---|
| 1. D | o you have any codebtors? (If you a | re filing a joint case, do not list eith | ner spouse as a code | btor.) |
| | No. | | | |
| | Yes | | | |
| | lithin the last 8 years, have you liverizona, California, Idaho, Lousiiana, N | | • , | unity property states and territories include and Wisconsin.) |
| | No. Go to line 3. | | | |
| | Yes. Did your spouse, former spo | use, or legal equivalent live with yo | ou at the time? | |
| | | e or territory did you live? | Fill ir | n the name and current address of that person. |
| | Name of your spouse, former spouse or | legal equivalent | | |
| | | | | |
| | Number Street | | | |
| | City | State | Zip Code | |
| 3 | chedule E/F, or Schedule G to fill ou | it Column 2. | | Column 2: The creditor to whom you owe the debt |
| | | | | Check all schedules that apply: |
| 3.1 | | | | Schedule D, line |
| | Name | | | Schedule E/F, line |
| | Number Street | | | Schedule G, line |
| | City | State | Zip Code | |
| 3.2 | | | | Schedule D, line |
| | Name | | | Schedule E/F, line |
| | Number Street | | | Schedule G, line |
| _ | City | State | Zip Code | |
| 3.3 | | | | Schedule D, line |
| | Name | | | Schedule E/F, line |
| | Number Street | | | Schedule G, line |
| | City | State | Zip Code | |

| Fill in this information to identify your case: | | | | | | |
|---|---------------|--------------------------------------|-----------|--|--|--|
| Debtor 1 | Crystal | Lashone | Brown | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States Case Number | . , | or the : <u>NORTHERN DISTRICT OF</u> | FILLINOIS | | | |
| (If known) | · | | _ | | | |
| | | | | | | |

| Che | ck if this is: |
|-----|---|
| | An amended filing |
| | A supplement showing post-petition |
| | chapter 13 income as of the following date: |
| | |
| | MM / DD / YYYY |

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | Part 1: Describe Employment | | | | | | | | |
|----|--|--------------------------|-------------------------|-------------------------------|-----------------------------------|--|--|--|--|
| 1. | Fill in your employment information | Debtor 1 | | Debtor 2 or non-filing spouse | | | | | |
| | If you have more than one job, attach a separate page with information about additional employers. | Employment status | X Employed Not employed | | Employed Not employed | | | | |
| | Include part-time, seasonal, or self-employed work. | Occupation | Cashier | | | | | | |
| | Occupation may Include student or homemaker, if it applies. | Employers name | Costco Wholesale |) | | | | | |
| | | Employers address | PO Box 34912 | | | | | | |
| | | | Seattle, WA 98124 | <u> </u> | , | | | | |
| | | | | | | | | | |
| | | How long employed there? | Since 1/1/2017 | | | | | | |
| Pa | IT 2: Give Details About Monthly | y Income | | | | | | | |
| | Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. | | | | | | | | |
| | | | | For Debtor 1 | For Debtor 2 or non-filing spouse | | | | |
| 2. | List monthly gross wages, salary and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. | | | \$4,080.37 | \$0.00 | | | | |
| 3. | Estimate and list monthly overtime pay. | | | \$0.00 | \$0.00 | | | | |
| 4. | Calculate gross income. Add line | 2 + line 3. | | \$4,080.37 | \$0.00 | | | | |

 Official Form 106I
 Record # 735270
 Schedule I: Your Income
 Page 1 of 2

Debtor 1 Crystal Lashone Document Brown Page 33 of 64 Case Number (if known)

Last Name

First Name

| | | | | For Debtor 1 | | Debtor 2 or filing spouse | | |
|-----|--------------|--|-----------------------------------|---------------------------|---------|---------------------------|-------------------|------------|
| | Сору | line 4 here | 4. | \$4,080.37 | | \$0.00 | | |
| | | payroll deductions: | | | | | | |
| | | ax, Medicare, and Social Security deductions | 5a. | \$734.59 | | \$0.00 | | |
| | | landatory contributions for retirement plans | 5b. | \$0.00 | | \$0.00 | | |
| | 5c. V | oluntary contributions for retirement plans | 5c. — | \$204.01 | | \$0.00 | | |
| | | lequired repayments of retirement fund loans | 5d. | \$300.08 | | \$0.00 | | |
| | | nsurance | 5e. | \$34.67 | | \$0.00 | | |
| | | omestic support obligations | 5f. _ | \$0.00 | | \$0.00 | | |
| | _ | Inion dues | 5g. | \$0.00 | | \$0.00 | | |
| | | ther deductions. Specify: | 5h. — | \$7.84 | | \$0.00 | | |
| | | payroll deductions . Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g +5h. | 6. _ = | \$1,281.19 | | \$0.00 | | |
| | | te total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$2,799.18 | | \$0.00 | | |
| | | other income regularly received: | | | | | | |
| | 8a. | Net income from rental property and from operating a business, | | | | | | |
| | | profession, or farm | | | | | | |
| | | Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total | | | | | | |
| | | monthly net income. | 8a. | \$0.00 | | \$0.00 | | |
| | 8b. | Interest and dividends | 8b. | \$0.00 | | \$0.00 | | |
| | 8c. | Family support payments that you, a non-filing spouse, or a | 8c. | \$ 0.00 | | \$ 0.00 | | |
| | | dependent regularly receive | | | | | | |
| | | Include alimony, spousal support, child support, maintenance, divorce | | | | | | |
| | | settlement, and property settlement. | | | | | | |
| | 8d. | Unemployment compensation | 8d. | \$0.00 | | \$0.00 | | |
| | 8e. | Social Security | 8e. | \$0.00 | | \$0.00 | | |
| | 8f. | Other government assistance that you regularly receive | 8f. | \$0.00 | | \$0.00 | | |
| | | Include cash assistance and the value (if known) of any non-cash | | | | | | |
| | | assistance that you receive, such as food stamps (benefits under the | | | | | | |
| | | Supplemental Nutrition Assistance Program) or housing subsidies. | | | | | | |
| | | Specify: | | | | | | |
| | 8g. | Pension or retirement income | 8g. — | \$0.00 | | \$0.00 | | |
| | 8h. | Other monthly income. Specify: | 8h. — | \$0.00 | | \$0.00 | | |
| 9. | Add | all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. | 9 | \$0.00 | | \$0.00 | | |
| 10. | Calc | ulate monthly income. Add line 7 + line 9. | 10. | \$2,799.18 + | | \$0.00 | . Г | \$2,799.18 |
| | Add | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | <u> </u> | +=, | | + 0.00 | L | Ψ2,7 00.10 |
| | Incluother | e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, you friends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not ify: | our dependent not available to | • | | | 11 | \$0.00 |
| | | the amount in the last column of line 10 to the amount in line 11. The res | | • | applica | | 12. | \$2,799.18 |
| | | that amount on the <i>Summary of Schedules</i> and <i>Statistical Summary of Ce</i> ou expect an increase or decrease within the year after you file this form | | s anu Reialeu Data, if ii | applies | | ' ^{2.} L | Ψ2,133.10 |
| 13. | <u>x</u> 1 | | | | | | | |

Case 17-03200 Doc 1 Filed 02/03/17 Entered 02/03/17 12:58:18 Document Page 34 of 64 Fill in this information to identify your case: Lashone Brown Check if this is: Crystal Middle Name Last Name First Name An amended filing A supplement showing post-petition chapter 13 First Name Middle Name Last Name income as of the following date: MM / DD / YYYY A separate filing for Debtor 2 because Debtor 2 maintains a separate household.

Debtor 1

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Debtor 1 Crystal Lashone Document Brown Page 35 of 64 Case Number (if known) _

| | | | Your expenses |
|-------------|--|------|---------------|
| 5. | Additional Mortgage payments for your residence, such as home equity loans | 5. | \$0 |
| i. l | Jtilities: | | |
| 6 | Sa. Electricity, heat, natural gas | 6a. | \$0 |
| 6 | Sb. Water, sewer, garbage collection | 6b. | \$0 |
| 6 | Sc. Telephone, cell phone, internet, satellite, and cable service | 6c. | \$220 |
| 6 | 6d. Other. Specify: | 6d. | \$ 0 |
| 7. I | Food and housekeeping supplies | 7. | \$300 |
| 3. (| Childcare and children's education costs | 8. | \$C |
| 9. (| Clothing, laundry, and dry cleaning | 9. | \$75 |
| 0. I | Personal care products and services | 10. | \$35 |
| 1. I | Medical and dental expenses | 11. | \$0 |
| | Fransportation. Include gas, maintenance, bus or train fare. Do not include car payments. | 12. | \$200 |
| 3. i | Entertainment, clubs, recreation, newspapers, magazines, and books | 13. | \$C |
| 4. (| Charitable contributions and religious donations | 14. | \$0 |
| | nsurance. | | |
| [| Oo not include insurance deducted from your pay or included in lines 4 or 20. | | |
| | 15a. Life insurance | 15a. | \$0 |
| | 15b. Health insurance | 15b. | \$0 |
| | 5c. Vehicle insurance | 15c. | \$120 |
| | 5d. Other insurance. Specify: | 15d. | \$C |
| 6. | Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. | | |
| 5 | Specify: | 16. | \$0 |
| 7. I | nstallment or lease payments: | | |
| | 17a. Car payments for Vehicle 1 | 17a. | \$671 |
| | 17b. Car payments for Vehicle 2 | 17b. | \$0 |
| | 17c. Other. Specify: | 17c. | \$0 |
| | 17d. Other. Specify: | 17d. | \$0 |
| 8. 1 | our payments of alimony, maintenance, and support that you did not report as deducted | | |
| f | rom your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I). | 18. | \$0 |
| 9. (| Other payments you make to support others who do not live with you. | | |
| 5 | Specify: Family Caregiver | 19. | \$200 |
| | Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. | | |
| | 20a. Mortgages on other property | 20a. | \$ 0 |
| | 20b. Real estate taxes | 20b. | \$ 0 |
| | 20c. Property, homeowner's, or renter's insurance | 20c. | \$ 0 |
| | 20d. Maintenance, repair, and upkeep expenses | 20d. | \$ 0 |
| | to the tent of the | | |

Official Form 106J Record # 735270

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| Debtor | 1 Cryst | al Lasnone | Brown | Case Number (if known) | | |
|--------|---|--|----------------------------------|------------------------|---------------|------------|
| | First Na | me Middle Name | Last Name | | | |
| 21. | Other. S | pecify: | | <u> </u> | 21. | \$0.00 |
| 22 | Your mo | nthly expense: Add lines 4 through 21. | | | 22. | \$2,571.00 |
| | The resu | It is your monthly expenses. | | | | |
| | | | | | | |
| | | | | | | |
| 23. | Calculate | your monthly net income. | | | | |
| | 23a. | Copy line 12 (your comibined monthly inc | come) from Schedule I. | | 23a | \$2,799.18 |
| | 23b. | Copy your monthly expenses from line 2: | 2 above. | | 23b. – | \$2,571.00 |
| | 23c. | Subtract your monthly expenses from yo | ur monthly income. | | 23c. | \$228.18 |
| | | The result is your monthly net income. | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| 24. | Do you e | xpect an increase or decrease in your ex | penses within the year after yo | ou file this form? | | |
| | For exam | ple, do you expect to finish paying for your | car loan within the year or do y | ou expect your | | |
| | mortgage payment to increase or decrease because of a modification to the terms of your mortgage? | | | | | |
| | X No | | | | | |
| | Yes | Explain Here: | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

 Official Form 106J
 Record #
 735270
 Schedule J: Your Expenses
 Page 3 of 3

| Fill in this in | Fill in this information to identify your case: | | | | |
|---------------------------|---|-----------------------------------|------------------|--|--|
| Debtor 1 | Crystal | Lashone | Brown | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States | Bankruptcy Court for | the : <u>NORTHERN</u> District of | ILLINOIS (State) | | |
| Case Number (If known) | r | | _ | | |

Official Form 106 Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Sign Below | |
|---|---|
| Did you pay or agree to pay someone who is NOT ar | n attorney to help you fill out bankruptcy forms? |
| No | |
| Yes. Name of Person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
| | |
| | |
| Under penalty of perjury, I declare that I have read the correct. | he summary and schedules filed with this declaration and that they are true and |
| | |
| ✗ /s/ Crystal Lashone Brown | × |
| Signature of Debtor 1 | Signature of Debtor 2 |
| Date 02/03/2017 | Date |
| MM / DD / YYYY | MM / DD / YYYY |
| | |

Fill in this information to identify your case: Debtor 1 Crystal Lashone Brown Middle Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the : <u>NORTHERN</u> District of <u>ILLINOIS</u> (State) Case Number Check if this is an (If known) amended filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| numbe | (If known). Answer every question. | | | |
|---------------|---|-------------------------------|-------------|-------------------------------|
| Part | 1: Give Details About Your Marital Status and Where Yo | u Lived Before | | |
| 01. W | hat is your current marital status? | | | |
| | Married | | | |
| | Not married | | | |
| 02 D ı | ıring the last 3 years, have you lived anywhere other tha | n where you live now | ? | |
| _ | No. Yes. List all of the places you lived in the last 3 years. Do | o not include where yo | u live now. | |
| | Debtor 1 | Dates Debtor 1 lived there | Debtor 2: | Dates Debtor 2 lived there |
| pr | ithin the last 8 years, did you ever live with a spouse or l operty states and territories include Arizona, California, d Wisconsin.) | | | |
| _ | No. Yes. Make sure you fill out Schedule H: Your Codebtors (| Official Form 106H) | | |
| _ | Tes. Make sure you iii out schedule 11. Tour Godebtors (| Omolai i omi roorij. | | |
| Part | 2. Explain the Sources of Your Income | | | |
| | • | | | |
| | | | | |
| | | | | |
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Debtor 1 Crystal Lashone Brown Case Number (if known) First Name Middle Name Last Name 04 Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. ☐ No. Yes. Fill in the details Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply (before deductions and Check all that apply (before deductions and exclusions) exclusions) Wages, commissions, Wages, commissions, \$1,883 From January 1 of current year until bonuses, tips bonuses, tips the date you filed for bankruptcy: Operating a business Operating a business Wages, commissions, Wages, commissions, \$52,338 For last calendar year: bonuses, tips bonuses, tips (January 1 to December 31, 2016) Operating a business Operating a business Wages, commissions, \$45,996 Wages, commissions, For the calendar year before that: bonuses, tips bonuses, tips (January 1 to December 31, 2015) Operating a business Operating a business 05 Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Describe below. (before deductions and Describe below. (before deductions and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

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Crystal Lashone Brown Case Number (if known) _ Debtor 1 First Name Middle Name Last Name Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,225* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,225* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of Total amount paid Amount you still owe Was this payment for... payments Chrysler Capital Po Box 961275 \$ 25,910 Monthly \$ 2,013 ■ Mortgage Car Fort Worth TX 76161 Credit card Loan repayment Suppliers or vendors Other Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Yes. List all payments to an insider. Dates of **Total amount** Amount you still Reason for this payment payment paid 08 Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. No. Yes. List all payments to an insider. Dates of **Total amount** Amount you still Reason for this payment Include creditor's name payment Part 4: Identify Legal actions, Repossessions, and Foreclosures

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| Dept | or 1 | Crysiai | Lasiione | DIOWII | Case Number (If known) | |
|-------|-------|----------------------------------|---|---------------------------------|--|--------------------|
| | | First Name | Middle Name | Last Name | | |
| 09 | List | | uding personal injury case | | urt action, or administrative proceeding? es, collection suits, paternity actions, support or cus | otody |
| □ No. | | | | | | |
| | | Yes. Fill in the details | | No. | • | 0.1 |
| | | Haritana Assautana | VC Crustal Brauna | Nature of the case | Court or agency | Status of the case |
| | | Heritage Acceptanc | · · · · · · · · · · · · · · · · · · · | Collection | Circuit Court of Cook County, Fourth | Pending |
| | | CASE NUMBER#16 | 01/14/005046 | | Municipal District | ☐ On appeal |
| | | | | | | Concluded |
| | | | | | | |
| 10 | | | filed for bankruptcy, was a fill in the details below. | any of your property repossess | sed, foreclosed, garnished, attached, seized, or levie | ed? |
| | | No. Go to line 11 | | | | |
| | | Yes. Fill in the information | ation below. | | | |
| | | | | | | |
| 11 | | - | ou filed for bankruptcy, on ment because you owed | | ank or financial institution, set off any amounts fr | om your accounts |
| | | No. Go to line 11 | | | | |
| | _ | Yes. Fill in the informa | | | | - |
| 12 | cou | rt-appointed receiver | filed for bankruptcy, wa , a custodian, or anothe | | possession of an assignee for the benefit of cred | itors, a |
| | = | No. Yes. | | | | |
| | art 5 | List Certain Gifts | and Contributions | | | |
| | | | u filed for bankruptcy, d | id you give any gifts with a to | otal value of more than \$600 per person? | |
| | | No. | | | | |
| | = | Yes. Fill in the details | for each gift. | | | |
| 14 | _ | | - | id you give any gifts or contr | ibutions with a total value of more than \$600 to ar | ny charity? |
| | | No. | | | | |
| | _ | Yes. Fill in the details | for each gift. | | | |
| | | | | | | |
| Ŀ | art 6 | List Certain Loss | es | | | |
| 15 | | hin 1 year before you nbling? | filed for bankruptcy or | since you filed for bankruptcy | r, did you lose anything because of theft, fire, oth | er disaster, or |
| | | No. | | | | |
| | Ц | Yes. Fill in the details | for each gift. | | | |
| ŀ | art 7 | List Certain Payr | nents or Transfers | | | |
| 16 | con | sulted about seeking | bankruptcy or preparin | g a bankruptcy petition? | n your behalf pay or transfer any property to anyo encies for services required in your bankruptcy. | one you |
| | П | | • | | - | |
| | = | Yes. Fill in the details | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
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Last Name

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Crystal Lashone Brown Case Number (if known)

| | Party Contact Info | Description and value of | any property transferred | Date pay or transf | | of payment |
|----|--|--------------------------------------|--------------------------|--|-------------------------|-------------|
| | Geraci Law L.L.C. | | | | Payment | /Value: |
| | 55 E. Monroe Street #3400 | - | | | \$4,000.0 | 0: \$0.00 |
| | Chicago,IL 60603 | _ | | | paid prior balance t | to hilling, |
| | | - | | | through t | the plan. |
| | | | | | | |
| | | | | | | |
| | Party Contact Info | Description and value of | any property transferred | Date pay | ment Amount | of payment |
| | arty contact into | Description and value of | any property transferred | or transf | | or payment |
| | Hananwill Credit Counseling | Credit Counseling Services | 3 | 2017 | \$25.00 | |
| | 115 N. Cross St. | | | | | |
| | Robinson, IL 62454 | | | | | |
| | | - | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| 17 | Within 1 year before you filed for bankruptc | | | sfer any property to ar | yone who | |
| | promised to help you deal with your creditor Do not include any payment or transfer that | | aitors? | | | |
| | No. | | | | | |
| | Yes. Fill in the details. | | | | | |
| | | | | | | |
| 18 | Within 2 years before you filed for bankrupto transferred in the ordinary course of your bu | | transfer any property to | anyone, other than p | roperty | |
| | Include both outright transfers and transfers | s made as security (such as the gra | | est or mortgage on yo | ur property). | |
| | Do not include gifts and transfers that you h | nave already listed on this statemen | t. | | | |
| | No. | | | | | |
| | Yes. Fill in the details for each gift. | | | | | |
| 19 | Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a | | | | | |
| | beneficiary? (These are often called asset-p | rotection devices.) | | | | |
| | No. | | | | | |
| | Yes. Fill in the details for each gift. | | | | | |
| P | List Certain Financial Accounts, Instru | uments, Safe Deposit Boxes, and Stor | age Units | | | |
| | Within 1 year before you filed for bankruptc | v wore any financial accounts or in | estruments held in your | name, or for your bene | ofit closed | |
| | sold, moved, or transferred? | - | • | | | |
| | Include checking, savings, money market, o houses, pension funds, cooperatives, associated as a second cooperative of the coope | • | • | n banks, credit unions | , brokerage | |
| | No. | -, | | | | |
| | Yes. Fill in the details. | | | | | |
| | _ | Last 4 digits of account number | Type of account or | Date account was | Last balance bef | |
| | | | instrument | closed, sold, moved, or transferred | closing or transf | er |
| | | | | | | |
| 21 | Do you now have, or did you have within 1 y cash, or other valuables? | ear before you filed for bankruptcy | , any safe deposit box o | or other depository for | securities, | |
| | No. | | | | | |
| | Yes. Fill in the details. | | | | | |
| | _ | Who else had access to it? | Describe the conte | nts | Do you still | |
| | | | | | have it? | |
| | | | | | | |

Debtor 1

First Name

Middle Name

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| Debtor 1 | Crystal | Lashone | Brown | Case Number (if known) | | | |
|---------------|---|---|-----------------------------------|--|--------------------|--|--|
| | First Name | Middle Name | Last Name | | | | |
| 22 📙 | wo you stored prop | orty in a storago unit or place | othor than your home within | 1 year before you filed for bankruptey? | | | |
| | Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? | | | | | | |
| | No. | | | | | | |
| | Yes. Fill in the deta | ils. | | | | | |
| | | Who e | lse has or had access to it? | Describe the contents | Do you still | | |
| | | | | | have it? | | |
| Part | 9: Identify Proper | rty You Hold or Control for Som | eone Else | | | | |
| | - | I any property that someone | else owns? Include any prope | erty you borrowed from, are storing for, or ho | ld in trust | | |
| fo | r someone. | | | | | | |
| | No. | | | | | | |
| | Yes. Fill in the deta | ils. | | | | | |
| | | Where | is the property? | Describe the property | Value | | |
| | | | | | | | |
| Part ' | Give Details Al | bout Environmental Information | n | | | | |
| For the | purpose of Part 10 | , the following definitions ap | ply: | | | | |
| | | | | | | | |
| haz | zardous or toxic sub | stances, wastes, or material | _ | ning pollution, contamination, releases of water, groundwater, or other medium, stes, or material. | | | |
| | _ | n, facility, or property as defi ate, or utilize it, including dis | = | law, whether you now own, operate, or utilize |) | | |
| | | eans anything an environmen material, pollutant, contamin | | s waste, hazardous substance, toxic | | | |
| Report | all notices, release | s, and proceedings that you | know about, regardless of who | en they occurred. | | | |
| 24 Ha | s any governmenta | I unit notified you that you m | ay be liable or potentially liabl | e under or in violation of an environmental la | iw? | | |
| | No. | | | | | | |
| - | - | ilo | | | | | |
| | Yes. Fill in the deta | | nmental unit | Environmental law, if you know it | Date of notice | | |
| | | Govern | illientai uliit | Environmentariaw, ii you know it | Date of notice | | |
| 25 Ha | ive you notified any | governmental unit of any rel | ease of hazardous material? | | | | |
| | No. | | | | | | |
| 7 | Yes. Fill in the deta | ilo | | | | | |
| L | res. Fill III the deta | | nmental unit | Environmental law, if you know it | Date of notice | | |
| | | Govern | illientai uliit | Environmentariaw, ii you know it | Date of notice | | |
| 26 Ha | ive you been a party | in any judicial or administra | tive proceeding under any env | vironmental law? Include settlements and ord | lers. | | |
| | No. | | | | | | |
| _ | Yes. Fill in the deta | ile | | | | | |
| | 1 res. r ili ili tile deta | | or agency | Nature of the case | Status of the case | | |
| | | Count | or agency | Nature of the case | otatus of the case | | |
| Part 1 | Give Details Al | bout Your Business or Connect | ions to Any Business | | | | |
| | | | • | | | | |
| 27 W i | ithin 4 years before | you filed for bankruptcy, did | you own a business or have a | ny of the following connections to any busin | ess? | | |
| | A sole propriet | or or self-employed in a trade | e, profession, or other activity | , either full-time or part-time | | | |
| | A member of a | limited liability company (LL | C) or limited liability partnersh | nip (LLP) | | | |
| | A partner in a p | partnership | | | | | |
| | An officer, dire | ctor, or managing executive | of a corporation | | | | |
| | _ | | ity securities of a corporation | | | | |
| , | No. None of the abo | ove applies. Go to Part 12. | | | | | |
| | _ | apply above and fill in the det | ails helow for each business | | | | |
| | 1 es. Oneck all tilat | appry above and nil in the det | שווט טפוטיש וטו במטו טעטוופטט. | | | | |
| | | | | | | | |
| | | | | | | | |
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| | | | | , | |
|------------|---|-------------|------------------------------------|--|-----|
| Debtor 1 | Crystal | Lashone | Brown | Case Number (if known) | |
| | First Name | Middle Name | Last Name | | |
| | hin 2 years before y titutions, creditors, | · | you give a financial statement t | o anyone about your business? Include all financial | |
| | No. | | | | |
| | Yes. Fill in the detai | ls. | | | |
| | | Date is: | sued | | |
| Part 12 | Sign Below | | | | |
| 4 | .S.C. §§ 152, 1341, 1 | | 40 | | |
| X | /s/ Crystal Lasho | one Brown | _ × | | |
| | Signature of Debtor | · 1 | Signature of | Debtor 2 | |
| | Date 02/03/2017 | | Date | | |
| | MM / DD / | YYYY | Date | DD / YYYY | |
| | No Yes You pay or agree to | | of Financial Affairs for Individua | Is Filing for Bankruptcy (Official Form 107)? kruptcy forms? | |
| □ ' | es. Name of perso | n | | Attach the Bankruptcy Petition Preparer's Notice, | |
| | | | | Declaration, and Signature (Official Form 119 | J). |

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

| In re | | | |
|-------------|--|---|--|
| Cryst | ll Lashone Brown / Debtor | Case No: | |
| | | Chapter: | Chapter 13 |
| | DISCLOSURE OF COMPENSATION OF AT | TORNEY FOR DEB | TOR |
| comp | ursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the nsation paid to me within one year before the filing of the petition in bankruptced or to be rendered on behalf of the debtor(s) in contemplation of or in connect | e attorney for the above y, or agreed to be paid | e named debtor(s) and that to me, for services |
|] | For legal services, I have agreed to accept \$4,000.00 | | |
|] | Prior to the filing of this statement I have received | | |
| Ī | Salance Due \$4,000.00 | | |
| 2. 7 | he source of the compensation paid to me was: | | |
| I | Debtor(s) Other: (specify) | | |
| 3. | he source of compensation to be paid to me is: | | |
| I | Debtor(s) Other: (specify) | | |
| 4. | I have not agreed to share the above-disclosed compensation with any other of my law firm. | person unless they are | e members and associates |
| | I have agreed to share the above-disclosed compensation with a other perso of my law firm. A copy of the agreement, together with a list of the names attached. | | |
| | return for the above-disclosed fee, I have agreed to render legal service for all ase, including: | aspects of the bankrup | tcy |
| a | , | tor in determining whe | ther to file a petition in |
| b | bankruptcy; Preparation and filing of any petition, schedules, statements of affairs and p | lan which may be requ | irad |
| 0 | Representation of the debtor at the meeting of creditors and confirmation he | | |
| · | representation of the deotor at the meeting of electrons and committation he | aring, and any adjourn | ica hearings thereor, |
| 6. E | y agreement with the debtor(s), the above-disclosed fee does not include the fo | llowing service: | |
| | | | |
| | CERTIFICATION | | |
| | I certify that the foregoing is a complete statement of any agreer payment to | nent or arrangement fo | r |
| | me for representation of the debtor(s) in this bankruptcy proceedings | 3. | |
| | Date: 02/03/2017 /s/ Kyle Thomas Dalln | nann | |
| | Date Signature of Attorney | | |
| | Geraci Law L.L.C. | | |

735270 Page 1 of 1 Record #

Name of law firm

File **Grad Blaw** Leht **G**red 02/03/17 12:58:18 Case 17-03200 Doc 1

Date: 12/30/2016

Consultation Attorney: MOK

Record #: 735-270

Attorney - Client Agreement

The undersigned hires Geraci Law L.L.C. and its associated attorneys for representation in a Chapter 13 bankruptcy under the following terms and conditions. I have signed and received a copy the "Court Approved Retention Agreement" (CARA) between Chapter 13 Debtors and their Attorneys" as established by the Bankruptcy Court for the Northern District of Illinois, and any terms that conflict with it are null and void. I understand I must comply with those terms. Attorney fees for filed Chapter 13 Bankruptcy shall be the fee stated in the CARA I have received the 11U.S.C § 527(a) disclosures. I have been advised of my chapter 7 alternative and choose to file Chapter 13 instead even though it usually costs more. More than one attorney and paralegal will work on my case.

appeals. If the Court awards additional fees, they will also be paid through the Chapter 13 Trustee. Fees are "flat fees" and "advance payment

FEES: This does NOT INCLUDE court filing fees of \$310, costs for credit counseling or financial management classes. Any amount not paid prior to the case being filed shall be paid through the Chapter 13 Trustee. These fees are fixed, but the attorneys may apply to the court for additional fees if allowed by the CARA or other circumstances, such as extended evidentiary hearings, contested adversary proceedings or retainers" for pre-filing and pre-confirmation work, become property of this firm on payment, and are deposited into the firm's operating account. Payments are applied to the "flat fee". If this contract is terminated by either party prior to the filing of the case, we will submit any dispute to binding arbitration within 30 days. If I close my file or breach this contract I agree to pay for the work done to that time. I assign to my attorney all amounts tendered as filing fees or court costs and authorize my attorney to transfer said funds from his trust account to his operating account in payment of all outstanding fees owed by me if case is not filed. No other work: Geraci Law is not representing me in state or other courts regarding creditors in my bankruptcy. Any state court action not stopped by the Automatic Stay of a filed bankrutpcy is my responsibility. Injury or other claims or property I must disclose any such claims or propery I now have or acquire after filing Chapter 13 to both the Chapter 13 trustee and to the court in a filed amendment and obtain authority to keep them or pay those claims to the Trustee. 200 per month for 36 months. The payment and length of the plan are based PLAN: The plan payment is estimated to be \$ on the information I have provided, including income, expenses, assets and debts. If these amounts are not accurate, my plan payment or duration may need to be increased. In addition, the Court, Chapter 13 Trustee or creditors could object to my proposed Chapter 13 payment, which may cause it to increase. I further understand that if my income or expenses change during my Chapter 13, my plan payment may have to change. I agree to read my petition and plan and study it before signing it so I know what is included, INCLUDING what I am listing as debts, what my property is, what my assets are and if they are claimed as exempt, and to make full disclosure. My plan payment DOES include the following, unless stated otherwise: mortgage arrears; association arrears; vehicles; tax debt; support obligations that are post due (but not future) parking tickets (not traffic fines); debts pursuant to a divorce decree/marital settlement you listed; other secured debts including furniture, electronics, etc., all other unsecured debts; other: My plan payment does NOT include include future mortgage, rent, condo fees and support payments; criminal fines/court fees; rent/lease arrears; student loan principal and interest unless 100% planned to unsecured creditors, sold property taxes; debts incurred after the case is filed including any association fees as long as the property is in my name; other Student loans: are usually NEVER paid 100% in a Chapter 13, but are paid the same percentage as unsecured creditors without interest, so my student loans will CONTINUE to accrue interest, and if I don't pay them directly they will be even larger at the end of the plan, so I have been told about this and I will deal with my student loans myself directly Debts not discharged if they not paid in full; student loans; educational debts; unfiled or late filed tax debts; undisclosed debts; support/maintenance debts; debts incurred by fraud, or debts listed in your red folder or found non-dischargeable by a Judge. Representation limited to Bankruptcy Court We do not represent you in state court, or in loan modifications or similar matters. If I am eligible to receive a tax refund during my Chapter 13, I understand I must turn it over to the Chapter 13 Trustee unless I am specifically advised that I do not need to. This may change on a yearly basis, so I must check with my attorneys every year. I also understand that if I receive any significant sums of money other than through employment, including but not limited to life insurance proceeds, workers compensation award, personal injury or other court settlement, I MUST notify my attorney immediately and I may have to pay some or all of the funds into my Chapter 13 plan. ad one admiring and oblight sufficients to beauthant or pay these, steading to I cannot transfer any property or incur any credit or debt without the express permission of my attorney or the Court and I must make full disclosure of all income, expenses, debts and assets in my initial consultation and on my bankruptcy petition. If I fail to remain current in a domestic support obligation, fail to certify to the Court that I have remained current, or if I fail to take my financial management class, that my case may be closed without a discharge, and I will be required to pay a fee to have it reopened. and the sum of the sum assets are and a fix (Joint Debtor) in each of a Crystal Brown (Debtor)

> de into e mantiposito con la completa na suri empreta posterioriste completat list. and the time of the photograph of the circulture, and discussed by the control of the control of the circulture of the c

so had somewith houses were weighted during considered on sold about pass or govern given have a con-

value (1995) to a Chapter 10, test and paid the course (backsmings and proceedings) because or so interest, and it ment has them govern, they will not be a larger of the so

o en la la como en esta Compa. Men um mun el proposito, esca y en caso pomet, cal materia mandiale está con el

Representing Geraci Law L.L.C. had a see als proported as a Attorney for the Debtor(s) dans, chemicalistics atc., all these shakaliness is like, orbits.

which are to being an fire properly in heavy assemble to the

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED. The case is the first of the profit of the case o

THE DEBTOR AGREES TO: The response of the description of the complete value of the description of the complete value of the description of the complete value of the complete va

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO THE PROPERTY OF THE PRO

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.



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- 3. Personally review with the debtor and signant completed bethiod, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO

1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.



CARA Page 2 of 6

- Case 17-03200 Doc 1 Filed 02/03/17 Entered 02/03/17 12:58:18 Desc Mair 2. Inform the debtor that the debtor must be possible of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.

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- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307 (a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

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to supplications of the configuration and the

Case 17-03200 Doc 1 Filed 02/03/17 Entered 02/03/17 12:58:18 Desc I C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the chapter 7 case for any unpaid fees and expenses, pursuant to section 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.



The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:

- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows: purpose: provide some money for attorney without waiting 6 months. Advantage to debtor: costs client less by reducing administrative expense and encouraging efficiency rather than charging by hour and submitting bills.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;

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- Case 17-03200 Doc 1 Filed 02/03/17 Entered 02/03/17 12:58:18 Any portion of the retainer that RGHUN earned of a squared profile expenses will be refunded to (d)
- the client; and
- The attorney is unwilling to represent the debtor without receiving an advanced payment (e) retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing.

E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

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CARA Page 5 of 6

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

| 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for |
|---|
| representing the debtor on all matters arising in the case unless otherwise ordered by the |
| For all of the services outlined above, the attorney will be paid a flat fee of \$ 4.000.00 |

| For all of the services outlined above, the attorney will be paid a flat fee of $$4,000.00$ |
|---|
| 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$310.00 |
| 3. Before signing this agreement, the attorney has received,\$ |
| toward the flat fee, leaving a balance due of \$ \(\frac{4000}{0} \); and \$ \(\frac{100}{0} \) for expenses, |
| leaving a balance due for the filing fee of \$ \(\frac{2}{10} \) |
| 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object. |
| Date: 12/30/20/6 |
| Date: 12130/20/6 Proposition of the control of the |
| |

Debtor(s) - approximately a states, the military has been a

Co-Debtor(s)

Attorney for the Debtor(s)

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UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re

| Crystal Lashone Brown | / Debtor | Bankruptcy Docket #: |
|------------------------------|----------|----------------------|
| | | |

Judge:

VERIFICATION OF CREDITOR MATRIX

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

Dated: 02/03/2017 /s/ Crystal Lashone Brown

Crystal Lashone Brown

X Date & Sign

Record # 735270 B 1D (Official Form 1, Exh.D)(12/08) Page 1 of 1

^{*} Joint debtors must provide information for both spouses. Penalty for making a false statement or concealing property: Fine up to \$500,000 or up to 5 years imprisonment or both. 18 U.S.C. 152 and 3571.

UNITED STATES BANKRUPTCY COURT

NOTICE TO CONSUMER DEBTOR(S) UNDER §342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly- addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total fee \$335

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are

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Form B 201A, Notice to Consumer Debtor(s)

In re Crystal Lashone Brown

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found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

| Dated: 02/03/2017 | /s/ Crystal Lashone Brown | | |
|-------------------|---------------------------|--|--|
| | Crystal Lashone Brown | | |
| | | | |
| | | | |

Dated: 02/03/2017 /s/ Kyle Thomas Dallmann

Attorney: Kyle Thomas Dallmann

Form B 201A. Notice to Consumer Debtor(s) Record # 735270 Page 2 of 2 Case 17-03200 Doc 1 Filed 02/03/17 Entered 02/03/17 12:58:18 Desc Main Document Page 56 of 64

| Debtor 1 | Crystal | Lashone | Brown | | |
|---------------------|----------------------|-----------------------------------|-----------|-----|--|
| | First Name | Middle Name | Last Name | - | |
| Debtor 2 | · | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | _ | |
| United States | Bankruptcy Court for | the : <u>NORTHERN</u> District of | ILLINOIS | | |
| Case Number | • | | (State) | | |
| (If known) | | | | - 1 | |

Official Form 106 Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankrupt No | tcy forms? |
|--|---|
| Yes. Name of Person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
| | |
| Under penalty of perjury, I declare that I have read the summary and schedules filed with the correct. | his declaration and that they are true and |
| ★ <u>Custor</u> Brown ★ Signature of Debtor 1 Signature of Debtor 2 | |
| Date : <u>0Q / DQ /2017</u> MM / DD / YYYY Date | YY |

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| Debtor 1 | Crystal | Lashone | Brown | Ones Novel | | |
|---------------------------------|--|--|---|--------------------------------|---|--------------------------------------|
| | First Name | Middle Name | Last Name | Case Number (i | f Known) | |
| represe if you a by an at | r attorney, if you are nted by one re not represented torney, you do not file this page. | each chapter for which 11 U.S.C. § 342(b) and | debtor(s) named in this petition, deer 7, 11, 12, or 13 of title 11, United in the person is eligible. I also certif d, in a case in which § 707(b)(4)(D) schedules filed with the petition is in | y that I have delivered to the | plained the relief available debtor(s) the notice reno knowledge after an i | le under quired by nquiry that |
| | | Signature of Made | mey for Deptor | | MM / DD / YYYY | /2017 |
| • | | Wylie W N | llok | | | |
| | | Printed name | | | | |
| : | | Geraci Lav | w L.L.C. | | | |
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| | * | Chicago | | IL | 60600 | |
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| | | Contact Phone | 312-332-1800 | Email addre | _{ess} ndil@geracila | w.com |
| | | 6293407 | | IL | | |
| | | Bar number | | State | _ | |
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| Debt | | Lashone Bi | rown Ca | se Number (if known) | | |
|---|---|---|---|--|---|--|
| | First Name | Middle Name Las | st Name | se Number (# Known) | | |
| Pa | ITI 6: Answer These Question | | | | | |
| | Answer These Question | ons for Reporting Purposes | | | | |
| 16. | What kind of debts do you have? | No. Go to line 16b. Are your debts prim money for a business o No. Go to line 16c. Yes. Go to line 17. | nduai primarily for a personal, family, or | ots are debts that you incurred to obtain the business or investment. | | |
| 17. | Are you filing under | | | | | |
| | Chapter 7? | * | er Chapter 7. Go to line 18. | | | |
| | Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | administrative exp | hapter 7. Do you estimate that after an enses are paid that funds will be availal | y exempt property is excluded and let to distribute to unsecured creditors? | | |
| 8. | How many creditors do | 1 -49 | 1 ,000-5,000 | D 25 204 50 205 | *************************************** | |
| | you estimate that you | 50-99 | 5,001-10,000 | 25,001-50,000 | | |
| | owe? | 1 00-199 | 10,001-25,000 | □ 50,001-100,000 | | |
| Water to the same of the same | | 200-999 | 10,001 20,000 | ☐ More than 100,000 | | |
| | How much do you estimate your assets to be worth? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | - Contraction of the Dilliott | Automotivased | |
| o. i | How much do you | □ \$0-\$50,000 | | | | |
| | estimate your liabilities | \$50,001-\$100,000 | \$1,000,001-\$10 million | ☐\$500,000,001-\$1 billion | | |
| | to be? | \$100,001-\$500,000 | \$10,000,001-\$50 million | \$1,000,000,001-\$10 billion | | |
| | | □ \$500,001-\$1 million | \$50,000,001-\$100 million | | | |
| Part | 7: Sign Below | | ☐ \$100,000,001-\$500 millio | on ☐ More than \$50 billion | | |
| or ye | 3.3.2.00 | I have examined this petition, a correct. | nd I declare under penalty of perjury the | at the information provided is true and | | |
| | | If I have chosen to file under Ch of title 11, United States Code. under Chapter 7. | napter 7, I am aware that I may proceed I understand the relief available under e | , if eligible, under Chapter 7, 11,12, or 13 each chapter, and I choose to proceed | | |
| | | If no attorney represents me an this document, I have obtained | d I did not pay or agree to pay someone and read the notice required by 11 U.S. | e who is not an attorney to help me fill out C. § 342(b). | | |
| | | I request relief in accordance wi | th the chapter of title 11, United States | Code, specified in this petition. | | |
| | | I understand making a false stat with a bankruptcy case can resu 18 U.S.C. §§ 152, 1341, 1519, a | false statement, concealing property, or obtaining money or property by fraud in connection can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 1, 1519, and 3571. | | | |
| • | | Signature of Debtor 1 | Brown x | Signature of Debtor 2 | A | |
| | | Executed on : <u>02 / 0</u> MM / DD | <u>) </u> | Executed on | | |
| | | | | MM / DD / YYYY | 200 Annual Contraction | |

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Debtor 1 Crystal Lashone Brown Case Number (if known) Last Name 28 Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Yes. Fill in the details. Date issued Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? No Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? Yes. Name of person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Filed 02/03/17 Entered 02/03/17 12:58:18 Case 17-03200 Desc Main IMERcupations have bead and agree:

- Divorce or family support debts to a spouse, ex-spouse, child, guardian ad litem or similar person or entityin connection with a separation agreement, divorce decree or court order are not dischargable. Priority support debts must be paid in full in your Chapter 13 or it cannot be confirmed. DEBTS YOU AGREED TO ASSUME IN MARITAL SETTLEMENT AGREEMENTS are NON-DISCHARGEABLE if your ex-spouse files an adversary complaint, and the Judge rules that (a) you do not have the ability to pay the debt OR (b) discharging such debt would result in a benefit to you that outweighs the detriment to ex-spouse or your child. You agree to get advice in writing from your divorce attorney and send to us with copy of agreement. You must list any ex-spouse or spouse as a creditor. No guarantee any divorce debt is dischargeable. Property you are still on title to, or have a right to in a divorce, may be taken by a Bankruptcy trustee in a Chapter 7 and sold, or may be disposable income in a 13.
- Student loans and educational benefits are not discharged in Chapter 7 or 13 if government insured loan or owed to non-profit school unless you pay us to file a complaint within the bankruptcy to prove repayment would be an "undue hardship", and win. Interest on student loans continue to run while you are in a
- Cosigners, joint applicants, debts of persons other than debtor, debts incurred during marriage in community property states, or for family support are not discharged and joint, community or co-signers are not protected from collection unless you pay 100% of the debt. Creditors can collect from co-signors and put your bankruptcy on their credit report, and report them negatively to credit bureaus. You may prevent this by making the regular payments to the creditor. Creditors can liquidate collateral of your co-signer and refuse to continue payment in installments. Property you are joint on with other persons can be LIQUIDATED to pay your creditors.
- TAX DEBTS. Most taxes are not discharged in bankruptcy. However, income tax debt (1040 type tax) can be discharged if the following four rules are met: (1). The tax return was DUE at least 3 YEARS (plus extensions) before the filing of your bankruptcy case. (2). You FILED your income tax return at least 2 YEARS before your bankruptcy was filed. (You did not file a return if the tax authority or IRS had to file one for you, or if you didn't send the return to the District Director) (3). You did not wilfully intend to evade the tax. (4). The tax must have been ASSESSED over 240 DAYS before the bankruptcy filing. We recommend you meet with the IRS or state department of revenue to make sure all the conditions have been met, before you hire us or file a bankruptcy. Fraudulent taxes and taxes on unfiled returns can be discharged in a Chapter 13 case. Time in an offers in compromise, & time in bankruptcy plus 6 months, will extend the above time periods. Employers' share of FICA & FUTA is dischargeable, but not trust fund taxes like the employee's funds or sales tax.
- 5. Fines, traffic tickets, parking tickets, penalties to governmental unit are not discharged in Chapter 7, may not be discharged in 13 without full payment. 6. Non filing spouse: If you file individually, your spouse is not our client. Only your debts are discharged. If you want to protect a non-filing spouse, pay their
- bills or file a joint case with them. Family expenses (medical bills, rent and necessities may be collected from a non-filing spouse). Wisconsin, community property is liable for community debts. 7. DUI PERSONAL INJURIES, DEBTS YOU DON'T LIST are not discharged.
- 8. DEBTS where creditors successfully object to discharge may survive Creditors, the Trustee, or Court, can try to deny discharge based on many factors, a. Income sufficient to pay a percentage of your unsecured debt. b. Failure to keep books and records documenting your financial affairs. c. Luxury purchases or cash advances within 60 days of filing or without intent or ability to repay. d. Debts you made by false pretenses, breach of fiduciary duty, wilful and malicious injuries to others e. Benefit overpayments like aid or unemployment if a determination of fraud has been made before or during bankruptcy. f. Failure to appear at meetings, court dates, or co-operate with the Trustee.
- 9. INTEREST ON NON-DISCHARGEABLE DEBTS in a Chapter 13 continues to accrue, and CREDITORS WHO DO NOT FILE CLAIMS in your Chapter 13 plan within 90 days (180 days for governmental units) of the meeting of creditors, do not get paid. Your plan and their claim should provide for interest at contract rate, or you will have to pay the debt outside the Chapter 13 plan. Property taxes must be paid by you directly to avoid sale for delinquent taxes.
- 10. LIQUIDATION OF REAL AND PERSONAL PROPERTY. If you file a Chapter 7, any property that is not listed and claimed exempt on Schedule C pursuant to state or federal law is taken and sold by the trustee to pay creditors. You agree to assume the risk that your property will be taken and sold by the bankruptcy trustee (at or less than what it is worth) if we can't protect it under applicable state law. You get a discharge, but the trustee can take property not listed and exempted on schedules B and C and sell it for whatever price will provide some benefit to creditors.
- 11. CHANGE IN LAWS. Laws & court cases change constantly. We can file your case today if you pay us in full (some attorneys give credit, we don't) pay the filing fee and sign your petition in our main office. ANY DELAY either in hiring us, or after, IS YOUR REPSONSIBILITY. ADVERSE RULINGS Judges that sit in adjoining courtrooms can rule differently on the same facts. We can predict but can't guarantee a judge will or will not rule against you. You accept the risk of a judge ruling against you, as in any lawsuit.
- 12. PAYMENTS TO CREDITORS YOU PREFERRED to pay more than \$600 in front of others, within 1 yr if a relative or insider, or within 90 days if another creditor, so don't pay off debts to keep credit cards or protect others. TRANSFERS OF PROPERTY within 4 years that made you unable to pay your debts at the time can be reversed by a Trustee and the transferee will have to give back the property you transferred.
- 13. SURRENDER OF PROPERTY Bankruptcy gets rid of debts, but real estate, condos and time shares remain in your name until a foredosure sale or the lender accepts a deed in lieu of foreclosure. Turn condo keys over to condo association or remain liable for assessments after filing, and make sure you keep buildings & land insured and maintained and secured until it is taken back by lender or out of your name. If you let a house go vacant and pipes explode or someone gets killed in there you may be liable.
- 14. RIGHT TO RECEIVE inheritances, tax refunds, injury claims, compensation of any kind, insurance or realty commissions, are property of the bankruptcy estate and you will surrender these to the trustee unless they are claimed exempt on Schedule C, and no objection to your claim of exemption is upheld. Do not deduct extra money from taxes so you are entitled to a refund, change your W-9 if necessary.
- 15. JOINT ACCOUNT HOLDERS holders entire amount in the account could be taken by the trustee under Chapter 7.
- 16. MARRIED COUPLES GOING THROUGH DIVORCE: We have been advised to seek independent counsel for our bankruptcy. We understand that Peter Francis Geraci does not represent us with regard to any divorce matters and does not make any representations regarding what will happen in divorce court. We have decided to file a bankruptcy together dispite the fact that we are getting a divorce and our interests could be adverse. We have agreed to cooperate with each other in this joint bankruptcy.
- .17. AUTO LEASES & INSTALLMENT AGREEMENTS to purchase things, leases and almost all contracts will be void after bankruptcy. They are "executory contracts", and if they are of no benefit to the bankruptcy estate and not assumed within 60 days of filing, they are void. Debtors have been warned of this, and unless there is a novation under state law, or agreement not to use bankrptcy to void the contract, the debtors rights under the contract are extinguished. Debtor agrees to be responsible for obtaining such agreements or losing rights under such contracts. Debtor agrees that his or her attorney will not file motions to assume
- 18. Setoffs if you have money in a credit union or creditor account, or other loans that cross-collateralized, any money or property may be taken for both loans. The Undersigned have read the above & assume the risk that a debt is not discharged in bankruptcy, that our non-exempt property will be taken and sold by the bankruptcy trustee if it can't be protected, that the trustee might object if I/we have excess income, or change in State, Federal or Bankruptcy laws before the case is filed in Court AND WE HAVE TO READ, CHECK, & MAKE SURE

| Dated: <u>02/02</u> /2017 | Custal Brawn | X Date & Sign |
|---------------------------|-------------------------|---------------|
| ` | O Crystal Lashone Brown | |

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UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

Crystal Lashone Brown / Debtor

In re

Bankruptcy Docket #:

Judge:

VERIFICATION OF CREDITOR MATRIX

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

Dated: <u>021 02 1</u>2017

Crystal Lashone Brown

X Date & Sign

^{*} Joint debtors must provide information for both spouses. Penalty for making a false statement or concealing property: Fine up to \$500,000 or up to 5 years imprisonment or both. 18 U.S.C. 152 and 3571.

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Part 4:

Sign Below

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

Crystal Lashone Brown

Date: <u>02/ 02 /</u>2017

If you checked line 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

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Debtor 1 Crystal Lashone Brown Case Number (if known)

First Name Middle Name Last Name

Part 5: Sign Below

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

Crystal Lashone Brown

Date: Dated: Od/ Od/2017

Entered 02/03/17 12:58:18 Desc Main

Filed 02/03/17

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Form B 201A, Notice to Consumer Debtor(s)

In re Crystal Lashone Brown / Debtor

Page 2

found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1,167 filling fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

Dated: Dal O 2 / 2017 Crystal Lashone Brown X Date & Sign

Dated: 7 / 2017

Attorney: Wylie W Mok